01/30/2009 12:47

Image# 29990882327

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 25 2008 12 3 1 2008 1 1 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 0 1 30 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Hospital Association PAC D D " D 25 12 1.1 2008 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 1507360.96 January 1 (b) Cash on Hand at 1012075.92 Begining of Reporting Period 335503.42 1835937.67 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1347579.34 3343298.63 6(a) and 6(c) for Column B) 6905.28 2002624.57 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1340674.06 1340674.06 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

1 1

From:

^D 2 5

2008

To:

м м 1 2 ^D 3 1

2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	194188.82	849608.36
	(i) Iternized (use Schedule A)	2010170	
	(ii) Unitemized	82134.73	395470.95
	(iii) TOTAL (add	276323.55	1245079.31
	Lines 11(a)(i) and (ii)	276323.33	1245079.51
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	5000.00	5975.00
	(d) Total Contributions (add Lines		
	11(a)(iii),(b) and (c)) (Carry	281323.55	1251054.31
	Totals to Line 33, page 5)	201323.33	1201004.01
2	Transfers From Affiliated/Other		
۷.	Party Committees	53450.00	551410.33
3.	All Loans Received	0.00	0.00
		0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
J.	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	0.00	0.00
6.	Refunds of Contributions Made		
	to Federal candidates and Other	0.00	28000.00
	Political Committees	0.00	28000.00
7.	Other Federal Receipts	729.87	F 470 00
	(Dividends, Interest, etc.)	129.01	5473.03
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account	0.00	0.00
	(from Schedule H3)	0.00	0.00
	(b) Lovin Funda (franc Calcadula LIF)	0.00	0.00
	(b) Levin Funds (from Schedule H5)		
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	(-) (
19.	Total Receipts (add Lines 11(d),	227722 12	1005007.00
	12, 13, 14, 15, 16, 17, and 18(c))	335503.42	1835937.67
00	Total Faderal Beneinte		
U.	Total Federal Receipts (subtract Line 18(c) from Line 19)	335503.42	1835937.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS

(b) Other Federal Operating

21. Operating Expenditures:

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To:

Individuals/Persons Other

(b) Political Party Committees (c) Other Political Committees

(d) Total Contribution Refunds

(from Schedule H6)

32. Total Federal Disbursements

from Line 31).....

23.

Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... 405.28 104711.97 Expenditures..... (c) Total Operating Expenditures 405.28 104711.97 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Federal Candidates/Committees.....and Other Political Committees..... 1500.00 1249400.00 0.00 639947.52 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 0.00 1154.75 Than Political Committees 0.00 0.00 0.00 1560.33 (such as PACs) 0.00 2715.08 (add Lines 28(a), (b), and (c)) 5000.00 5850.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 6905.28 2002624.57 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. (subtract Line 21(a)(ii) and Line 30(a)(ii)

6905.28

2002624.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	281323.55	1251054.31
34.	Total Contribution Refunds (from Line 28(d))	0.00	2715.08
85.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	281323.55	1248339.23
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	405.28	104711.97
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	405.28	104711.97

FE6AN026

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 231 (check only one) X
Any information copied from suc or for commercial purposes, oth NAME OF COMMITTEE (In American Hospital Asso	er than using the name and a Full)	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middl Mr. Christopher M Dadlez Mailing Address 114 Woo	odland Street State	Zip Code	Date of Receipt 1 1 2 5 2 0 0 8 Transaction ID: 16146117
Hartford FEC ID number of contribution federal political committee.	ng CT	06105-1208	Amount of Each Receipt this Period
Name of Employer Saint Francis Care, Inc. Receipt For: Primary Gene Other (specify) ▼	Aggrega	tion ent and Chief Executive Office ate Year-to-Date ▼ 1000.00	er .
Full Name (Last, First, Middl Ms. Leslie Gianelli Mailing Address 110 Barr	, 		Date of Receipt 1 1 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: 16146118
Wallingford FEC ID number of contribution federal political committee.	ng CT	06492-1802	Amount of Each Receipt this Period 350.00
Name of Employer Connecticut Hospital Association Receipt For: Primary Gene Other (specify) ▼	Aggrega	or, Communications ate Year-to-Date ▼	
Full Name (Last, First, Middl Ms. MaryEllen Kosturko, MHSI Mailing Address 267 Gra	M, BSN,		Date of Receipt 1 1 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: 16146121
Bridgeport FEC ID number of contribution federal political committee.	CT C	06610-2805	Amount of Each Receipt this Period 250.00
Name of Employer Bridgeport Hospital	Occupa Senior	tion Vice President	
Receipt For: Primary Gene Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This I	Page (optional)		1600.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 231 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Alison L Hong Mailing Address 25 Woodland Road City Bedford Hills FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NY 10507-1713 C Occupation Director of Quality Patient Safety Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Gordon N. Litwin Mailing Address 63 Borden Place City Little Silver FEC ID number of contributing federal political committee. Name of Employer Meridian Health Receipt For: Primary General Other (specify)	State Zip Code NJ 07739-1726 C Occupation Vice Chairman Aggregate Year-to-Date 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest B City Manasquan FEC ID number of contributing federal political committee.	State Zip Code NJ 08736-4001	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Chief Information Officer Aggregate Year-to-Date 235.00	
SUBTOTAL of Receipts This Page (optional)		505.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAG			
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Ro		Date of Receipt	
	State Zip Code	1 1 2 8 2 0 0 8 2 0 0 8	
City <u>Langhorne</u>	PA 19047-2306	Transaction ID: 16146859 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	5.00	
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President, Human Resources		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein		Date of Receipt	
Mailing Address 27 Harvest Lane		11 28 2008	
City	State Zip Code	Transaction ID: 16146864	
Livingston FEC ID number of contributing federal political committee.	NJ 07039-2750	Amount of Each Receipt this Period 5.00	
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President Continuing Care Service	De	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt	
Mailing Address 6180 Lower Mounta	Mailing Address 6180 Lower Mountain Road		
City New Hope	State Zip Code PA 18938-5760	Transaction ID: 16146868 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C 10930-3760	5.00	
Name of Employer New Jersey Hospital Assoc- jation	Occupation Sr. VP., Health Economics		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 339.61		
SUBTOTAL of Receipts This Page (optional	l)	15.00	
TOTAL This Period (last page this line num	<u> </u>		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 23 E. Delaware Avenu		111 / 28 / 2008
City Pennington	State Zip Code NJ 08534-2302	Transaction ID: 16146869 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.		Date of Receipt
Mailing Address 4 Poppy Lane		11 28 2008
City	State Zip Code	Transaction ID: 16146881
Howell FEC ID number of contributing federal political committee.	NJ 07731-1451	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation VP Health Economics	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	
Full Name (Last, First, Middle Initial) Ms. Valerie Sellers	<u> </u>	Date of Receipt
Mailing Address 82 Millers Grove Road		11 28 YYYY 2008
City <u>Belle Mead</u>	State Zip Code NJ 08502-4306	Transaction ID: 16146882 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Senior V.P., Health Planning & Resea	ar¢
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 355.00	1
		45.00
SUBTOTAL of Receipts This Page (optional)	15.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 231 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>		
Full Name (Last, First, Middle Initial) Mr. David A Nelson			Date of Receipt
Mailing Address 2400 St Francis D	rive		M M / D D / Y Y Y Y Y 1 1 1 2 6 2 0 0 8
City Breckenridge	State MN	Zip Code 56520-1025	Transaction ID: 16146924 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30320 1023	250.00
Name of Employer St. Francis Healthcare Ca- mpus	Occupation Presiden	n t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Bruce J. Rueben	 		Date of Receipt
Mailing Address 306 East College	Avenue		1 1 2 6 Y Y Y Y Y Y
City Tallahassee	State FL	Zip Code 32301-1522	Transaction ID: 16149252 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	OZOOT TOZZ	88.93
Name of Employer Florida Hospital Associat- ion	Occupation Presiden		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 503.52	
Full Name (Last, First, Middle Initial) Mr. James F Hanko			Date of Receipt
Mailing Address 1300 Anne St. NW	1		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bemidii	State MN	Zip Code 56601	Transaction ID: 16149822
FEC ID number of contributing federal political committee.	C	30001	Amount of Each Receipt this Period 187.50
Name of Employer North Country Regional Ho- spital		t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	ial)		526.43

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 231 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms Kathy Johnson Mailing Address 200 North Elm Stree	et		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Onamia FEC ID number of contributing federal political committee.	State MN	Zip Code 56359-7901	Transaction ID: 16149823 Amount of Each Receipt this Period 250.00
Name of Employer Johnson Memorial Health Services Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Administ Aggregate		
Full Name (Last, First, Middle Initial) Dr. Peter E Person, , M.D. Mailing Address 502 East Second St	treet		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16150557
<u>Duluth</u>	MN	55805-1982	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer St. Mary's/Duluth Clinic Health System Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n t and Chief Executive Officer e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Cynthia Ann Moore-Hardy	•		Date of Receipt
Mailing Address 10 East Washington	า		1 1 2 6 2 0 0 8
City	State	Zip Code	Transaction ID: 16150581
Painesville FEC ID number of contributing federal political committee.	C	44077-3460	Amount of Each Receipt this Period 250.00
Name of Employer Lake Hospital System	Occupation Presiden	n t and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	· I)		750.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 231 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ . .	Full Name (Last, First, Middle Initial) Ms. Cynthia K. Smith, JD Mailing Address 560 El Dorado		Date of Receipt
	City Lawrence	State Zip Code KS 66047	Transaction ID: 16154508 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Sisters of Charity of Lea- venworth Heal Receipt For: Primary General Other (specify) ▼	Occupation Advocacy Counsel Aggregate Year-to-Date 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. John E. Callender Mailing Address 2743 Elginfield Road		Date of Receipt 1 1 2 6 2 0 0 8
	City	State Zip Code	Transaction ID: 16154594
	Upper Arlington	OH 43220-4247	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Ohio Hospital Association	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
	Full Name (Last, First, Middle Initial) Mr. William A. Sutton		Date of Receipt
	Mailing Address 4653 Ginger Trail		11 26 2008
	City Toledo	State Zip Code OH 43623-1041	Transaction ID: 16154597 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 40020 1041	250.00
	Name of Employer Mercy Hospital of Defiance	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
[SUBTOTAL of Receipts This Page (optional)		550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Douglas W McNeill, , FACHE		Date of Receipt
Mailing Address 105 McKnight Dr. City	State Zip Code	1 1 2 6 2 0 0 8 Transaction ID: 16154600
Middletown	OH 45044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Atrium Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William Linesch		Date of Receipt
Mailing Address 4508 Royal Ridge Way		12 01 7 9 9 9
City	State Zip Code	Transaction ID: 16154625
<u>Kettering</u>	OH 45429-1300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Miami Valley Hospital	Occupation VP Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Thomas E Cecconi		Date of Receipt
Mailing Address 1320 Mercy Drive NW		12 01 2008
City	State Zip Code	Transaction ID: 16154627
Canton	OH 44708-2614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Medical Center	Occupation President and Chief Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number of	·	

FEC ID number of contributing federal political committee. Name of Employer Akron Children's Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dawn Ahner Mailing Address 77 Pringle Way City State Zip Contributing federal political committee. Name of Employer Renown Health Receipt For: Primary General Other (specify) ▼ C C C Aggregate Year-to-I Occupation Chief Financial Contribution C	Date of Receipt Date of Receipt
Full Name (Last, First, Middle Initial) Mr. William H Considine Mailing Address One Perkins Square City State Zip (250.00 M M
Full Name (Last, First, Middle Initial) Mr. Dawn Ahner Mailing Address 77 Pringle Way City State Zip C Reno NV 895 FEC ID number of contributing federal political committee. Name of Employer Renown Health Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms Talana Bell	Date of Receipt
Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms Talana Bell	Amount of Each Receipt this Period 500.00 fficer
Mailing Address P O Box 6907 City State Zip 0 Dothan AL 3630 FEC ID number of contributing federal political committee.	Date of Receipt M
Name of Employer Flowers Hospital Receipt For: Primary Other (specify) Occupation Chief Financial C Aggregate Year-to-I	
SUBTOTAL of Receipts This Page (optional)	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 15 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be a name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Carl W Bailey Mailing Address P O Box 818			Date of Receipt
		01-1- 7'	0.4	12 04 2008
	City <u>Florence</u>	·	o Code 5631-0818	Transaction ID: 16155137 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Eliza Coffee Memorial Hos- pital	Occupation Administrator		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	500.00 ▼	
— В.	Full Name (Last, First, Middle Initial) Mr. Jason P. Alexander Mailing Address 7220 Wynnridge Drive			Date of Receipt
	Mailing Address 7220 Wynnridge Drive			12 04 2008
	City Mobile		Code	Transaction ID: 16155138
	FEC ID number of contributing federal political committee.	C	6695-5500	Amount of Each Receipt this Period 300.00
	Name of Employer Providence Hospital	Occupation Executive Vice	President & COO	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to	o-Date ▼ 300.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Mark R Stoddard			Date of Receipt
	Mailing Address 48 West 1500 North			1 2 0 3 2 0 0 8
	City	·	o Code	Transaction ID: 16155756
	Nephi FEC ID number of contributing federal political committee.	UT 84	1648-8900	Amount of Each Receipt this Period 500.00
	Name of Employer Rural Health Group	Occupation President		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	500.00 ▼	
	SUBTOTAL of Receipts This Page (optional) .	1		1300.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 231 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse aname and address of any political committee to	
Full Name (Last, First, Middle Initial) Mr. Rexford W. Titus, III Mailing Address 345 Woodland Lane City Oconomowoc FEC ID number of contributing federal political committee. Name of Employer ProHealth Care Receipt For: Primary General Other (specify)	State Zip Code WI 53066-2734 C Occupation CEO Aggregate Year-to-Date 500.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. James G Chastain, , CHE Mailing Address P O Box 157-A City Whitfield FEC ID number of contributing federal political committee. Name of Employer Mississippi State Hospital Receipt For: Primary General Other (specify)	State Zip Code MS 39193-0157 C Occupation Director Aggregate Year-to-Date 260.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Charles L Denton Mailing Address 960 Avent Drive City Grenada FEC ID number of contributing federal political committee. Name of Employer Grenada Lake Medical Center Receipt For: Primary General Other (specify)	State Zip Code MS 38901-5230 C Occupation Chief Executive Officer Aggregate Year-to-Date 610.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		895.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 231 (check only one) X
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. WIII Ferniany		Date of Receipt
Mailing Address 2500 North State Str	eet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16155981
Jackson FEC ID number of contributing federal political committee.	MS C	Amount of Each Receipt this Period 500.00
Name of Employer University Hospitals and	Occupation	_
Clinics, Univ	Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Eddie L. Foster		Date of Receipt
Mailing Address 116 Woodgreen Cros	ssing	M M / D D / Y Y Y Y Y 12 02 2008
City	State Zip Code	Transaction ID: 16155983
<u>Madison</u>	MS 39110-4522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mississippi Hospital Asso- ciation	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.50	
Full Name (Last, First, Middle Initial) Mr. Lawrence Graeber	_ 	Date of Receipt
Mailing Address 124 E. Waterwood D	Prive	12 02 7 2008
City	State Zip Code	Transaction ID: 16155989
Brandon	MS 39047-6527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer University Hospitals and Clinics, Univ	Occupation Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	

		FOR LINE NUMBER: PAGE 18 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. G. Douglas Higginbotham Mailing Address P O Box 607 City Laurel FEC ID number of contributing federal political committee. Name of Employer South Central Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code MS 39441-0607 C Occupation Executive Director Aggregate Year-to-Date 285.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Mr. Fred B Hood, , FACHE Mailing Address P O Box 790 City Pontotoc FEC ID number of contributing federal political committee. Name of Employer North Mississippi Medical Center-Ponto Receipt For: Primary General	State Zip Code MS 38863-0790 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y O S Transaction ID: 16155996 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. L Ray Humphreys Mailing Address 1400 East Union Str City Greenville FEC ID number of contributing federal political committee. Name of Employer Delta Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code MS 38703-3246 C Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	510.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 231 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Kurt W Metzner		Date of Receipt
Mailing Address 1225 North State S	treet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16156018
<u>Jackson</u>	MS 39202-2064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	875.00
Name of Employer Mississippi Baptist Health System	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	875.00	
Full Name (Last, First, Middle Initial) Mr. M Kenneth Posey, , FACHE		Date of Receipt
Mailing Address P O Box 527		1 2 0 2 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16156028
Bay Springs	MS 39422-0527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jasper General Hospital	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. W. Kent Rogers		Date of Receipt
Mailing Address 835 Medical Center	Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16156034
West Point	MS 39773-9320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	315.00
Name of Employer North Mississippi Medical Center-West	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	615.00	
SUBTOTAL of Receipts This Page (optional	1	1440.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. W. Dale Saulters		Date of Receipt
Mailing Address P O Box 967		12 02 YYYY 12 02 2008
City	State Zip Code	Transaction ID: 16156035
Louisville	MS 39339-0967	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer Winston Medical Center	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Melinda Estes, , M.D.		Date of Receipt
Mailing Address 111 Colchester Avenue)	1 2 0 4 2 0 0 8
City	State Zip Code	Transaction ID: 16157614
Burlington	VT 05401-1473	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Fletcher Allen Health Care	Occupation President and Chief Executive Officer	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Calvin D Johnson		Date of Receipt
Mailing Address P O Box 188		M M / D D / Y Y Y Y Y 1 2 0 0 8
City	State Zip Code	Transaction ID: 16157633
Kilmichael	MS 39747-0188	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Kilmichael Hospital	Occupation Administrator	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)	······	900.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Stephen M Erixon		Date of Receipt
Mailing Address 220 Windy Ridge		12 05 2008
City	State Zip Code	Transaction ID: 16159420
Hollister	MO 65672-5725	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Skaggs Community Health Center	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	462.00	
Full Name (Last, First, Middle Initial) Mr. Peter L Gosline		Date of Receipt
Mailing Address 452 Old Street Road		12 08 2008
City	State Zip Code	Transaction ID: 16161930
Peterborough	NH 03458-1295	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Monadnock Community Hospi- tal	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)		Date of Descript
Ms. Paula Minnehan Mailing Address 283 Gallopiny Hill Ro	ad	Date of Receipt
City	State Zip Code	12 08 2008
Hopkinton	NH 03229-3402	Transaction ID: 16161931 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer New Hampshire Hospital As- sociation	Occupation V.P., Finance and Rural Hospitals	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1	742.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butler Street City Salem FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Hospital Receipt For: Primary General Other (specify)	State Zip Code NH 03079-3925 C Occupation Chief Executive Officer and Administrate Aggregate Year-to-Date 350.00	Date of Receipt 1 2 0 8 2 0 8 Transaction ID: 16161932 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Mr. Reginald J. Lavoie Mailing Address Swiftwater Road City Woodsville FEC ID number of contributing federal political committee. Name of Employer Cottage Hospital Receipt For: Primary General Other (specify)	State Zip Code NH 03785-2001 C Occupation Administrator Aggregate Year-to-Date 250.00	Date of Receipt M M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Paul Rutledge, FACHE Mailing Address 110 Winners Circle First Floor City Brentwood FEC ID number of contributing federal political committee. Name of Employer HCA Receipt For: Primary General Other (specify)	State Zip Code TN 37027-5070 C Occupation President Aggregate Year-to-Date 1000.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	1600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Mr. Allen Golson			Date of Receipt
Mailing Address 350 Hospital Drive			12 08 2008
City Macon	State GA	Zip Code	Transaction ID: 16162333
FEC ID number of contributing federal political committee.	C	31217-3838	Amount of Each Receipt this Period 250.00
Name of Employer Coliseum Medical Centers	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Robert M Trimm			Date of Receipt
Mailing Address P O Box 139			12 08 2008
City	State GA	Zip Code	Transaction ID: 16162341
Waycross FEC ID number of contributing federal political committee.	C	31502-0139	Amount of Each Receipt this Period 250.00
Name of Employer Satilla Regional Medical Center	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jay M. Baumgartner			Date of Receipt
Mailing Address 111 Woodlawn Dr.			1 2 0 8 2 0 0 8
City Warsaw	State IN	Zip Code 46580-4750	Transaction ID: 16162370
FEC ID number of contributing federal political committee.	C	40300-4730	Amount of Each Receipt this Period 250.00
Name of Employer Otis R. Bowen Center for Human Service		ancial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Cara Breidster Mailing Address I-65 at 21st Street			Date of Receipt
City Indianapolis	State IN	Zip Code 46202	Transaction ID: 16162377 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Clarian Health Partners Receipt For: Primary General Other (specify)		Director, Tax e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. Thomas Crawford Mailing Address 700 Forest Drive			Date of Receipt 1 2 0 8 2 0 0 8
City	State	Zip Code	Transaction ID: 16162388
<u>Frankfort</u>	IN	46041-2636	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer St. Vincent Frankfort Hos- pital		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Blake A Dye	'		Date of Receipt
Mailing Address 2805 W. County Ro	ad 250 S		12 08 2008
City	State	Zip Code	Transaction ID: 16162394
New Castle FEC ID number of contributing federal political committee.	C	47362-9719	Amount of Each Receipt this Period 500.00
Name of Employer Henry County Hospital	Occupatio Hospital		
Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. R. Mark Ellison		Date of Receipt
Mailing Address 3040 Reflection Ct.		12 08 2008
City Greenwood	State Zip Code IN 46143-6618	Transaction ID: 16162397 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Indianapolis Hospital	Occupation Controller	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Richard Graffis, , M.D.		Date of Receipt
Mailing Address P O Box 1367		12 08 YYYY 2008
City	State Zip Code	Transaction ID: 16162403
Indianapolis	IN 46206-1367	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Clarian Health Partners	Occupation Executive Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Steven S. Ivy, Ph.D.		Date of Receipt
Mailing Address 1701 North Senate B	oulevard	12 08 2008
City	State Zip Code	Transaction ID: 16162414
Indianapolis	IN 46202-1239	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Clarian Health Partners	Occupation Hospital VP	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Jeffrey Linder Mailing Address P.O. Box 1367 City	State	Zip Code	Date of Receipt M
Indianapolis FEC ID number of contributing federal political committee.	C	46206-1367	Amount of Each Receipt this Period 500.00
Name of Employer Clarian Health Partners Receipt For: Primary General Other (specify) ▼		vP, Gov't Affairs e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Dr. Jon D. Rahman, M.D. Mailing Address 418 Burlington Lane)		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16162449
<u>Carmel</u>	IN	46032-9162	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer St. Vincent Health	Occupatio Chief Me	n edical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Linda Roberts	•		Date of Receipt
Mailing Address 1701 North Senate I	Boulevard		12 08 2008
City	State	Zip Code	Transaction ID: 16162456
Indianapolis FEC ID number of contributing federal political committee.	C	46202-1239	Amount of Each Receipt this Period 500.00
Name of Employer Clarian Health	Occupatio Hospital	n Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any persor name and address of any political committee to s	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Bernadine Marcuccilli Wallace		Date of Receipt
Mailing Address 1003 Overlook Road		12 08 2008
City	State Zip Code	Transaction ID: 16162478
<u>Marion</u>	IN 46952-1330	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Marion General Hospital	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Martin Bonick		Date of Receipt
Mailing Address 6019 Waterfall Way		M M / D D / Y Y Y Y Y Y 1 2 0 9 2 0 0 8
City	State Zip Code	Transaction ID: 16162588
Prospect	KY 40059-7505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Jewish Hospital	Occupation President/CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Mr. Donald R Fields		Date of Receipt
Mailing Address 100 Medical Center Dri	ve	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16162598
<u>Hazard</u>	KY 41701-9421	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hazard ARH Regional Medic- al Center	Occupation Senior Community Chief Executive Of	fic
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 231 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Michael T. Rust Mailing Address 937 Woodland Hei	ghts Drive		Date of Receipt
City Louisville FEC ID number of contributing	State KY	Zip Code 40245-5219	Transaction ID: 16162599 Amount of Each Receipt this Period 500.00
Receipt For: Primary Other (specify) ▼	Occupatio Presiden	n t and Chief Executive Officer e Year-to-Date ▼ 500.00	r
Full Name (Last, First, Middle Initial) Mr. Dennis B Johnson Mailing Address 1025 New Moody L	ane		Date of Receipt 1 2 0 9 2 0 0 8
City	State	Zip Code	Transaction ID: 16162600
<u>La Grange</u>	KY	40031-9154	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Baptist Hospital Northeast	Occupatio Administ		
Receipt For: Primary General	Aggregate	e Year-to-Date ▼ 250.00	1
Other (specify)	0 0		
Full Name (Last, First, Middle Initial) Mr. David L Gray			Date of Receipt
Mailing Address 913 North Dixie Av	enue		12 09 2008
City	State	Zip Code	Transaction ID: 16162601
Elizabethtown FEC ID number of contributing federal political committee.	C	42701-2599	Amount of Each Receipt this Period 500.00
Name of Employer Hardin Memorial Hospital	Occupatio Presiden		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	1		1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 231 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Charles Black Mailing Address P O Box 1310 City	State Zip Code	Date of Receipt 1 2 0 9 2 0 0 8 Transaction ID: 16162603
Mount Vernon FEC ID number of contributing federal political committee.	KY 40456-1310	Amount of Each Receipt this Period 500.00
Name of Employer Rockcastle Hospital and Respiratory Ca Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Milton Brooks Mailing Address 850 Riverview Aven	nue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16162604
Pineville	KY 40977-1430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Pineville Community Hospital Associati Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen A Estes		Date of Receipt
Mailing Address P O Box 1310		1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16162605
Mount Vernon FEC ID number of contributing federal political committee.	KY 40456-1310	Amount of Each Receipt this Period 500.00
Name of Employer Rockcastle Hospital and Respiratory Ca Receipt For:	Occupation Chief Executive Officer Aggregate Year-to-Date ▼	
Primary General Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optiona	· I)	1500.00

CHEDULE A (FEC Form 3X) **EMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 30 / 231 (check only one) X		
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to so			
American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Jeff Smithern		Date of Receipt		
Mailing Address 145 Newcomb Avenue		12 09 2008		
City	State Zip Code	Transaction ID: 16162607		
Mount Vernon	KY 40456-2728	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Rockcastle Hospital and	Occupation			
Respiratory Ca	Director of Respiratory Care			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	250.00			
Full Name (Last, First, Middle Initial) Mr. John Burgett		Date of Receipt		
Mailing Address 1 Trillium Way		12 09 2008		
City	State Zip Code	Transaction ID: 16162609		
London	KY 40701-8420	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Baptist Regional Medical Center	Occupation Chief Financial Officer			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Mr. Frank A. Butler		Date of Receipt		
Mailing Address 437 Adair Road		12 09 YYYY 12 09 2008		
City	State Zip Code	Transaction ID: 16162610		
Lexington	KY 40536-0001	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	500.00		
Name of Employer University of Kentucky Ho- spital	Occupation Vice President/Medical Center Operation			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	500.00			
SUBTOTAL of Receipts This Page (optional)		1000.00		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 231 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr Joseph G Koch			Date of Receipt
Mailing Address 531 Woodlawn Ave	nue		12 09 2008
City	State WV	Zip Code	Transaction ID: 16162611
Beckley FEC ID number of contributing federal political committee.	C	25801-6008	Amount of Each Receipt this Period 250.00
Name of Employer Bourbon Community Hospital	Occupation	n	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James Ramsey			Date of Receipt
Mailing Address 530 South Jackson	Street		12 09 2008
City Louisville	State KY	Zip Code 40202-1675	Transaction ID: 16162613
FEC ID number of contributing federal political committee.	C	40202-1073	Amount of Each Receipt this Period 500.00
Name of Employer University of Louisville	Occupation Trustee	n	
Hospital Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mrs. Susan Stout Tamme, , FACHE			Date of Receipt
Mailing Address 4000 Kresge Way			1 2 0 9 2 0 0 8
City Louisville	State KY	Zip Code 40207-4605	Transaction ID: 16162614
FEC ID number of contributing federal political committee.	C	40207-4003	Amount of Each Receipt this Period 500.00
Name of Employer Baptist Hospital East	Occupation President		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
			1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Stephen L Meredith Mailing Address 910 Wallace Avenue City Leitchfield FEC ID number of contributing	State Zip Code KY 42754-2414	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Twin Lakes Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr Carl G Herde Mailing Address 4007 Kresge Way		Date of Receipt 1 2 0 9 2 0 0 8
City	State Zip Code	Transaction ID: 16162617
Louisville	KY 40207-4677	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Baptist Healthcare System	Occupation Vice President and Chief Financial Off	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. E. Berton Whitaker		Date of Receipt
Mailing Address 900 Clinic Drive		12 09 2008
City	State Zip Code	Transaction ID: 16162623
Madisonville FEC ID number of contributing federal political committee.	KY 42431-1653	Amount of Each Receipt this Period 500.00
Name of Employer Regional Medical Center of Hopkins Cou Receipt For:	Occupation President & CEO Aggregate Year-to-Date	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional		1250.00

TEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 33 / 231 (check only one) X 11a		
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Mr. Jack G. Blackwell Mailing Address 2201 Forest Ave		Date of Receipt		
City	State Zip Code	1 2 0 9 2 0 0 8 Transaction ID: 16162628		
Ashland	KY 41101	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	312.00		
Name of Employer Highlands Regional Medical Center	Occupation Chief Financial Officer			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 312.00			
Full Name (Last, First, Middle Initial) Mr. Edward Nairn		Date of Receipt		
Mailing Address Highlands Regional M Box 668		12 09 7 2008		
City	State Zip Code	Transaction ID: 16162633		
Prestonburg	KY 41653-0668	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Highlands Regional Medical Center	Occupation Board Member			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Mr. Harold C Warman, , Jr., FAC		Date of Receipt		
Mailing Address P O Box 668		12 09 7 2008		
City	State Zip Code	Transaction ID: 16162635		
Prestonsburg	KY 41653-0668	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	500.00		
Name of Employer Highlands Regional Medical Center	Occupation President and Chief Executive Officer			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	500.00			
SUBTOTAL of Receipts This Page (optional) .		1062.00		
TOTAL This Period (last page this line numbe	·			

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than use NAME OF COMMITTEE (In Full) American Hospital Association	s and Statements may not be sold or used by any perso sing the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Chris Carle Mailing Address 238 Barnes Roa City Williamstown	State Zip Code KY 41097-9460	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer St. Elizabeth Medical Center-Grant Cou Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Ms. Carolyn J. Belk Mailing Address 8060 EI Rio St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Houston FEC ID number of contributing federal political committee.	State Zip Code TX 77054-4186 C	Transaction ID: 16162644 Amount of Each Receipt this Period 350.00
Name of Employer Methodist Hospital, The Receipt For: Primary General Other (specify) ▼	Occupation VP Government Affairs Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. Donald J Wee Mailing Address 363 SE Third St	reet	Date of Receipt 1 2 0 9 2 0 0 8
City Prineville	State Zip Code OR 97754-1206	Transaction ID: 16162651 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Pioneer Memorial Hospital	Occupation	250.00
Receipt For: Primary General Other (specify)	Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (opt	ional)	850.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 231 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		· ·	
Full Name (Last, First, Middle Initial) Mr. Dennis E Burke			Date of Receipt
Mailing Address 370 W Gettman Ro	ad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Hermiston	State OR	Zip Code 97838-8456	Transaction ID: 16162653 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37030 0430	250.00
Name of Employer Good Shepherd Healthcare System	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Ms. Pamela S Vukovich			Date of Receipt
Mailing Address 1919 NW Lovejoy S	Street		12 09 2008
City Portland	State OR	Zip Code	Transaction ID: 16162654
FEC ID number of contributing federal political committee.	C	97209-1503	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupation Senior Vi	n ice President and Chief Fina	— no
Receipt For: Primary General Other (specify) ▼	- + ·	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Wayne Clark			Date of Receipt
Mailing Address 7555 SW Afton Lan	е		12 09 2008
City	State	Zip Code	Transaction ID: 16162665
Tigard FEC ID number of contributing federal political committee.	OR	97224-7680	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupation VP Comi	n m Relations & Marketing	
Receipt For: Primary General Other (specify) ▼	- ' '	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional])		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 231 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG	C		
Full Name (Last, First, Middle Initial) George Brown, MD			Date of Receipt
Mailing Address 376 NW 81 PI			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State OR	Zip Code	Transaction ID: 16162666
Portland FEC ID number of contributing federal political committee.	C	97229-6777	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupation President		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Richard Gibson			Date of Receipt
Mailing Address 1000 NE Greenleaf	Road		12 09 2008
City Portland	State OR	Zip Code 97229	Transaction ID: 16162668 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	O LEO	250.00
Name of Employer Legacy Health System	Occupation Senior V	n P & Chief Information Office	 r
Receipt For: Primary General Other (specify) ▼	- 	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. George Cioffi, MD.			Date of Receipt
Mailing Address 3639 NW Thurman			12 09 2008
City Portland	State OR	Zip Code 97210-1232	Transaction ID: 16162669
FEC ID number of contributing federal political committee.	C	3/210-1252	Amount of Each Receipt this Period 500.00
Name of Employer Legacy Health System	Occupation Chief of 0	n Opthalmology	
Receipt For: Primary General Other (specify) ▼		year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1000.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37/231 (check only one)
ny information copied from such Reports and	Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
r for commercial purposes, other than using th	e name and add	dress of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Russ Danielson			Date of Receipt
Mailing Address 1926 Aztec Court			12 09 2008
City	State	Zip Code	Transaction ID: 16162670
West Linn	OR	97068-4804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Providence St. Vincent Me- dical Center	Occupation Sr. Vice	n President/CEO-Oregon Regi	ion
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		500.00	1
Other (specify)		300.00	
Full Name (Last, First, Middle Initial) Mr. Mark D. Scott	1		Date of Receipt
Mailing Address 8275 Junco Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16162671
Redmond	OR	97756-8352	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Silverton Hospital	Occupation Chief Exp	n perience Officer	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Mr. William E Winter			Date of Receipt
Mailing Address 342 Fairview Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16162672
Silverton	OR	97381-1917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Silverton Hospital	Occupation Administ	n rative Director	_
Receipt For:		Year-to-Date ▼	
Primary General	30 0		1
Other (specify)	0 0	715.00	
	1		1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 231 (check only one) X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Andrew S. Davidson Mailing Address 2123 Ridgebrook Drive	1		Date of Receipt 1 2
	City West Linn	State OR	Zip Code 97068-1943	Transaction ID: 16162673 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	37000 1343	1195.00
	Name of Employer Oregon Association of Hos- pitals & Heal Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate	& CEO Year-to-Date ▼ 1695.00	
3.	Full Name (Last, First, Middle Initial) Andy Van Pelt Mailing Address 4000 Kruse Way Place	,		Date of Receipt 1 2 0 9 2 0 0 8
	Building 2, Suite 100 City	State	Zip Code	Transaction ID: 16162674
	Lake Oswego FEC ID number of contributing federal political committee.	OR	97035-5545	Amount of Each Receipt this Period 210.00
	Name of Employer Oregon Association of Hospitals & Heal Receipt For: Primary General Other (specify) ▼		f Communications Year-to-Date ▼ 210.00	
_ ;.	Full Name (Last, First, Middle Initial) Mr. Terry O Finklein			Date of Receipt
	Mailing Address 2111 Exchange Street			12 09 2008
	City Astoria	State OR	Zip Code 97103-3329	Transaction ID: 16162675
	FEC ID number of contributing federal political committee.	C	97103-3329	Amount of Each Receipt this Period 250.00
	Name of Employer Columbia Memorial Hospital	Occupation Chief Exec	cutive Officer	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional))	1655.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Mel Pyne		Date of Receipt
Mailing Address 3015 Summit Sky Bi		12 09 2008
City Eugene	State Zip Code OR 97405-6253	Transaction ID: 16162676 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 37403 0230	500.00
Name of Employer PeaceHealth	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Peter F Rapp		Date of Receipt
Mailing Address 2828 NW Cumberla	nd Road	12 09 2008
City	State Zip Code	Transaction ID: 16162677
<u>Portland</u>	OR 97201-3098	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer OHSU Hospital	Occupation Vice President and Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Michael Murphy		Date of Receipt
Mailing Address 3394 Creek View		12 09 2008
City	State Zip Code	Transaction ID: 16162679
Medford FEC ID number of contributing federal political committee.	OR 97504-9624	Amount of Each Receipt this Period 250.00
Name of Employer Asante Health System	Occupation Vice President of Medical Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional))	1250.00
TOTAL This Period (last page this line numb	·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 231 (check only one) X
An	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u> </u>	Full Name (Last, First, Middle Initial) Mr. James Bowden Mailing Address PO Box 238 City	State	Zip Code	Date of Receipt M
	Kingsport FEC ID number of contributing federal political committee.	TN	37662-0238	Amount of Each Receipt this Period 300.00
	Name of Employer Wellmont Holston Valley Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		dical Officer Year-to-Date 300.00	
3.	Full Name (Last, First, Middle Initial) Ms. Martha O'Regan Chill Mailing Address 10820 Parkside Drive			Date of Receipt
	City Knoxville FEC ID number of contributing	State TN	Zip Code 37934-1956	Transaction ID: 16164064 Amount of Each Receipt this Period 300.00
	Name of Employer Wellmont Holston Valley Medical Center Receipt For: Primary General Other (specify)	Occupation Vice Pres	n sident-Operations Year-to-Date 300.00	
 :.	Full Name (Last, First, Middle Initial) Ms. Linda Crawford Mailing Address 440 May 15th Olympia			Date of Receipt
	Mailing Address 142 West 5th Street City Cookeville	State TN	Zip Code 38501-1760	Transaction ID: 16164065 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Cookeville Regional Medic-	Occupation		. 250.00
	al Center Receipt For: Primary General Other (specify) ▼		Administrator, Nursing Serv Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			850.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for	e separate schedule(s) each category of the stailed Summary Page	FOR LINE NUMBER: PAGE 41 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be name and address of	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr Gregory M. Duckett			Date of Receipt
Mailing Address 350 North Humphreys	Boulevard		12 10 2008
City	State Z	Zip Code	Transaction ID: 16164066
Memphis	TN 3	38120-2177	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Baptist Memorial Health Care Corporati	Occupation Senior Vice Pr	resident/ Corporate Co	uns
Receipt For:	Aggregate Year-	<u>'</u>	
Primary General Other (specify) ▼	93.53	1000.00	
Full Name (Last, First, Middle Initial) Mr. Gregg Gentry	ı		Date of Receipt
Mailing Address 975 East Third Street			12 10 2008
City		Zip Code	Transaction ID: 16164067
Chattanooga	TN 3	37403-2163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Erlanger Medical Center	Occupation Chief Human	Resources Officer	
Receipt For:	Aggregate Year-	to-Date V	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr David C Hogan			Date of Receipt
Mailing Address 350 North Humphreys	Boulevard		M M / D D / Y Y Y Y Y 1 Y 1 1 2 1 0 0 8
City	State Z	Zip Code	Transaction ID: 16164081
Memphis	TN 3	38120-2177	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Baptist Memorial Health Care Corporati	Occupation Executive Vice	e President and Chief C)pe
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	•		1500.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 231 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Stephen Johnson		Date of Receipt
Mailing Address 975 East Third Street		12 10 2008
Chattanaga	State Zip Code	Transaction ID: 16164083
Chattanooga	TN 37403-2147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Erlanger Health System	Occupation Vice President, Prayer Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Mr. Paul Korth	1	Date of Receipt
Mailing Address P O Box 340		12 10 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16164085
Cookeville	TN 38503-0340	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cookeville Regional Medic- al Center	Occupation Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr John W Lacey, , M.D.		Date of Receipt
Mailing Address 1924 Alcoa Hwy, Box	81	12 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16164086
Knoxville	TN 37920-1511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University of Tennessee Medical Center	Occupation Senior Vice President and Chief Med	ica
Receipt For: Primary Other (specify)	Aggregate Year-to-Date ▼ 250.00	
CURTOTAL of Descints This Dags (actional)		800.00

SCHEDULE A (FE ITEMIZED RECEIF	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 231 (check only one) X
Any information copied from or for commercial purposes, NAME OF COMMITTEE American Hospital As	other than using the name and a (In Full)	nay not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
City	21st Avenue, South State	Zip Code	Date of Receipt 1 2 1 0 2 0 0 8 Transaction ID: 16164087
Nashville FEC ID number of contribution federal political committee		37232-0011	Amount of Each Receipt this Period 250.00
Name of Employer Vanderbilt University Medical Center Receipt For: Primary Other (specify) ▼	ASSI. V	ion ice Chancellor ate Year-to-Date ▼ 250.00	
Full Name (Last, First, Mi Mr. Norman Majors Mailing Address 1520 Suite	Cherokee Trail		Date of Receipt 1 2 1 0 2 0 0 8
City Knoxville FEC ID number of contrib	State TN	Zip Code 37920-2225	Transaction ID: 16164089 Amount of Each Receipt this Period
Name of Employer University of Tennessee Medical Center Receipt For:	Occupat Senior	ion Vice President ate Year-to-Date 250.00	250.00
Full Name (Last, First, Mi Ms. Susan O'Hare Mailing Address 975 E	ddle Initial) ast Third Street		Date of Receipt
City Chattanooga	State TN	Zip Code 37403-2103	Transaction ID: 16164097 Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			300.00
Name of Employer Erlanger Health System Receipt For:		ion e President ate Year-to-Date ▼	
	eneral	300.00	
SUBTOTAL of Receipts Th	is Page (optional)		800.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ . .	Full Name (Last, First, Middle Initial) Mr. Jim S Pate Mailing Address P O Box 802 City	State Zip Code	Date of Receipt M
	Erwin FEC ID number of contributing federal political committee.	TN 37650-0802	Amount of Each Receipt this Period 275.00
	Name of Employer Unicoi County Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 275.00	
3.	Full Name (Last, First, Middle Initial) Mr. Stephen Curtis Reynolds Mailing Address 350 North Humphreys	Boulevard	Date of Receipt 1 2 1 0 2 0 0 8
	City	State Zip Code	Transaction ID: 16164107
	Memphis FEC ID number of contributing federal political committee.	TN 38120-2177	Amount of Each Receipt this Period 500.00
	Name of Employer Baptist Memorial Health Care Corporati Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	<u>-</u>]
_	Full Name (Last, First, Middle Initial)		Polari Positi
•	Mr. Steven Ross Mailing Address 1924 Alcoa Highway, E	3ox 81	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 16164108
	Knoxville FEC ID number of contributing	TN 37920-1511	Amount of Each Receipt this Period
	federal political committee.	C	250.00
	Name of Employer University of Tennessee Medical Center	Occupation Asst. Executive Director, Clinical Ser	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		1025.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 231 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) Mr Rick Wagers		Date of Receipt
Mailing Address 1211 22nd Avenue 9		12 10 2008
City	State Zip Code	Transaction ID: 16164109
Nashville FEC ID number of contributing federal political committee.	TN 37232-2102	Amount of Each Receipt this Period 250.00
Name of Employer Vanderbilt University Med- ical Center	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Derick Ziegler		Date of Receipt
Mailing Address PO Box 310		12 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16164110
Union City	TN 38281-0310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	280.00
Name of Employer Baptist Memorial Hospital- Union City	Occupation CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial) Mr. William A. Bell		Date of Receipt
Mailing Address 944 Gentian Court		12 12 2008
City	State Zip Code	Transaction ID: 16166439
Tallahassee	FL 32312-1228	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Associat- ion	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
CURTOTAL of Descripto This Days (anti-one))	1030.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
/_ A .	Full Name (Last, First, Middle Initial) Ms. Dana Ferrell Mailing Address 3303 Park Street City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Nemours Children's Clinic	State Zip Code FL 32205-7830 C Occupation Director of Government Relations	Date of Receipt 12 12 2008 Transaction ID: 16166440 Amount of Each Receipt this Period 250.00
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Mr. John Wilgis Mailing Address 3036 Giles Place		Date of Receipt 1 2 1 2 2 0 0 8
	City Tallahassee FEC ID number of contributing federal political committee.	State Zip Code FL 32309-2114	Transaction ID: 16166441 Amount of Each Receipt this Period 600.00
	Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Director, Emergency Mgmt. Svcs. Aggregate Year-to-Date ▼ 1200.00	
	Full Name (Last, First, Middle Initial) Ms. Kathy Holzer		Date of Receipt
	Mailing Address 306 East College Aven City	ue State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166442
	<u>Tallahassee</u>	FL 32301-1522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Florida Hospital Associat- ion	Occupation Vice President, Health Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)		1100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or 1	or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	American Hospital Association PAC Full Name (Last, First, Middle Initial)		
	Mr. Ralph Glatfelter Mailing Address 7285 Heartland Circle		Date of Receipt
	City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166444
	Tallahassee	FL 32312-7501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Florida Hospital Associat- ion	Occupation Senior Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1200.00	
	Full Name (Last, First, Middle Initial) Ms. Kathy A. Reep		Date of Receipt
	Mailing Address 19 W. New Hampshire)	12 12 2008
	City	State Zip Code	Transaction ID: 16166445
	Orlando	FL 32804-5911	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Florida Hospital Associat- ion - Orlando	Occupation Vice President, Financial Services	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
	Full Name (Last, First, Middle Initial) Mr. Mark O'Bryant		Date of Receipt
	Mailing Address 1300 Miccosukee Roa	d	12 12 2008
	City	State Zip Code	Transaction ID: 16166446
	Tallahassee	FL 32308-5054	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	500.00
	Name of Employer Tallahassee Memorial Heal- thCare	Occupation President and Chief Executive Office	cer
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Other (specify)	1000.00	
	IDTOTAL (D Ti: D / ii . l)		1350.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedul for each category of th Detailed Summary Pag	e (Check only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by an e name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Ms. Phillis Oeters		Date of Receipt
Mailing Address 6855 Red Road, Suite	600	12 12 2008
City	State Zip Code	Transaction ID: 16166447
<u>Miami</u>	FL 33143-3632	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Baptist Health South Flor- ida	Occupation Corporate Vice President Gove	ernment an
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.	00
Full Name (Last, First, Middle Initial) Ms. Kim Streit	ı	Date of Receipt
Mailing Address 1317 Eastin Avenue		12 12 2008
City	State Zip Code	Transaction ID: 16166448
Orlando	FL 32804-6309	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Florida Hospital Associat- ion - Orlando	Occupation VP, Health Research & Information	ation
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.	00
Full Name (Last, First, Middle Initial)	0 0 0 0 0 0 0	
Mr. Rich Rasmussen		Date of Receipt
Mailing Address 405 El Destinado Driv	е	1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166449
Tallahassee	FL 32301-1522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Associat- ion	Occupation VP for Strategic Communication	ons
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.	00
SURTOTAL of Receipts This Page (optional)		1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Michael Galloway Mailing Address 444 North Capitol Stree Suite 532	et, NW		Date of Receipt 1 2 1 2 2 0 0 8
	City Washington	State DC	Zip Code 20001-1512	Transaction ID: 16166450 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer Florida Hospital Associat- ion Receipt For: ☐ Primary ☐ General Other (specify) ▼		sident, Federal Advocacy • Year-to-Date ▼ 1200.00	
3.	Full Name (Last, First, Middle Initial) Ms. Karen Late, MHS Mailing Address 444 North Capitol Stree	et, NW		Date of Receipt
	Suite 532 City	State	Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166451
	Washington FEC ID number of contributing	DC C	20001-1512	Amount of Each Receipt this Period 500.00
	Name of Employer Florida Hospital Association Receipt For:	Occupation Director,	n Federal Advocacy e Year-to-Date	
	Primary General Other (specify) ▼		1000.00]
_ :.	Full Name (Last, First, Middle Initial) Ms. Patricia Jackson			Date of Receipt
	Mailing Address 3390 Dockside Drive			12 12 2008
	City Hollywood	State FL	Zip Code	Transaction ID: 16166452
	FEC ID number of contributing federal political committee.	C	33026-3780	Amount of Each Receipt this Period 125.00
	Name of Employer Memorial Healthcare System	Occupation System I	n Director, Community Project:	 s
	Receipt For: Primary General Other (specify) ▼	<u> </u>	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1225.00
T	TOTAL This Period (last page this line number of	only)	.	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 231 (check only one) X 11a
A C	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may r name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Douglas Baer Mailing Address 3599 University Blvd S	outh		Date of Receipt
	City Jacksonville	State FL	Zip Code 32216-4252	Transaction ID: 16166456 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	SEE 10 IEOE	125.00
	Name of Employer Brooks Rehabilitation Hos- pital Receipt For: ☐ Primary ☐ General Other (specify) ▼		cutive Officer /ear-to-Date ▼ 250.00	
 i.	Full Name (Last, First, Middle Initial) Dr. Greg Zorman, M.D. Mailing Address 5730 Arapahoe Road			Date of Receipt 1 2 1 2 2 0 0 8
	City	State	Zip Code	Transaction ID: 16166459
	Fort Lauderdale FEC ID number of contributing federal political committee.	FL C	33312-6354	Amount of Each Receipt this Period 250.00
	Name of Employer Memorial Healthcare System	Occupation Chief of Ne	eurosurgery	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr Larry F Garrison			Date of Receipt
	Mailing Address 6450 US Highway 1			12 12 2008
	City Rockledge	State FL	Zip Code 32955-5747	Transaction ID: 16166461
	FEC ID number of contributing federal political committee.	C	32935-3141	Amount of Each Receipt this Period 250.00
	Name of Employer Health First, Inc.	Occupation Chief Oper	rating Officer	
	Receipt For: Primary General Other (specify) ▼	- '	/ear-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 231 (check only one) X 11a	
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Mr. Tim Eixenberger Mailing Address 2982 Castle Wood L City Clearwater FEC ID number of contributing federal political committee. Name of Employer Bayfront Medical Center	State Zip Code FL 33759-1810 C Occupation	Date of Receipt 1 2	
Receipt For: Primary General Other (specify)	Vice President Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr Robert Galloway Mailing Address 1350 South Hickory	Street	Date of Receipt 1 2 1 2 2 0 0 8	
City	State Zip Code	Transaction ID: 16166470	
Melbourne FEC ID number of contributing federal political committee.	FL 32901-3278	Amount of Each Receipt this Period 125.00	
Name of Employer Holmes Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Finance and C Aggregate Year-to-Date 250.00	Chie	
Full Name (Last, First, Middle Initial) Mr. John E Matuska		Date of Receipt	
Mailing Address 3663 South Miami A	Mailing Address 3663 South Miami Avenue		
City	State Zip Code	Transaction ID: 16166471	
Miami FEC ID number of contributing federal political committee.	FL 33133-4237	Amount of Each Receipt this Period 500.00	
Name of Employer Mercy Hospital	Occupation President and Chief Executive Office	er	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		
	1	750.00	

SCHEDULE A (FEC FOITEMIZED RECEIPTS	rm 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 231 (check only one) X
Any information copied from such R or for commercial purposes, other the NAME OF COMMITTEE (In Full American Hospital Associated)		n for the purpose of soliciting contributions
Full Name (Last, First, Middle Ini Chris Roederer	<u> </u>	Date of Receipt
Mailing Address 615 Riviera City	Dunes Way #107 State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166476
Palmetto	FL 34221-7145	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tampa General Hospital	Occupation Vice President for Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Ini Mr. John R. Brownlow Mailing Address 5608 Bear L	<i>'</i>	Date of Receipt
		12 12 2008
City	State Zip Code	Transaction ID: 16166481
<u>Apopka</u>	FL 32703-1916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital	Occupation Vice President and Chief Operating O	ff
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Ini Ms. Sally Houston	ial)	Date of Receipt
Mailing Address 6528 Surfsion	de Blvd.	12 12 2008
City	State Zip Code	Transaction ID: 16166492
Apollo Beach	FL 33572-3008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tampa General Hospital	Occupation Chief Medical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page	(optional)	375.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 231 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John Bond Mailing Address 3417 Eastmonte Drive		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166509
<u>Valrico</u>	FL 33596-6087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer Tampa General Hospital	Occupation Vice President, Surgical Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Sally Jackson		Date of Receipt
Mailing Address 8250 College Parkway Suite 103	7:01	12 12 2008
City Fort Myore	State Zip Code FL 33919-5199	Transaction ID: 16166517
Fort Myers FEC ID number of contributing federal political committee.	FL 33919-5199	Amount of Each Receipt this Period 125.00
Name of Employer Lee Memorial Health System	Occupation System Director of Community Proje	ect s
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Richard M Irwin, , Jr.		Date of Receipt
Mailing Address 501 Lake Street		12 12 2008
City Windormore	State Zip Code FL 34786	Transaction ID: 16166535
Windermere FEC ID number of contributing	FL 34786	Amount of Each Receipt this Period 350.00
federal political committee.		255.56
Name of Employer Health Central	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
SUBTOTAL of Receipts This Page (optional)		600.00

Wuesthoff Medical Center -	me and address of any political committee to so	Date of Receipt Date of Receipt
Ms. Chantal Leconte Mailing Address P O Box 565002, Mail Sto City Rockledge FEC ID number of contributing federal political committee. Name of Employer Wuesthoff Medical Center - Rockledge Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Deana L. Nelson Mailing Address Post Office Box 1289 City	State Zip Code FL 32956-5002	1 2 1 2 2 0 0 8 Transaction ID: 16166539 Amount of Each Receipt this Period
Rockledge FEC ID number of contributing federal political committee. Name of Employer Wuesthoff Medical Center - Rockledge Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Deana L. Nelson Mailing Address Post Office Box 1289 City	FL 32956-5002	Transaction ID: 16166539 Amount of Each Receipt this Period
federal political committee. Name of Employer Wuesthoff Medical Center - Rockledge Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Deana L. Nelson Mailing Address Post Office Box 1289 City		
Rockledge Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Deana L. Nelson Mailing Address Post Office Box 1289 City	Occupation	125.00
Ms. Deana L. Nelson Mailing Address Post Office Box 1289 City	Administrator Aggregate Year-to-Date ▼ 250.00	
-		Date of Receipt 1 2 1 2 2 0 0 8
Tamna	State Zip Code	Transaction ID: 16166541
таттра	FL 33601-1289	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Tampa Caparal Haspital	Occupation Sr. Vice President, Patient Services	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Paul Goldstein		Date of Receipt
Mailing Address 1414 Kuhl Avenue		12 12 2008
City	State Zip Code	Transaction ID: 16166542
Longwood	FL 32806-2093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Orlando Regional Healthca- re	Occupation Vice President Finance and Chief Finar	<u> </u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	250.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 231 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG		,,,	
Full Name (Last, First, Middle Initial) Mr. Jim L Mayo, , FACHE			Date of Receipt
Mailing Address 1250 South 18th St	reet		1 2 1 2 2 0 0 8
City Fernandina Beach	State FL	Zip Code 32034-3098	Transaction ID: 16166544 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Baptist Medical Center Na- ssau	Occupation Administ		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Stephen A Purves, , FACHE			Date of Receipt
Mailing Address 1500 SW 1st Ave			12 12 2008
City	State	Zip Code	Transaction ID: 16166551
Ocala FEC ID number of contributing federal political committee.	FL C	34474	Amount of Each Receipt this Period 500.00
Name of Employer Munroe Regional Medical Center	Occupation Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Lorraine L. Lutton			Date of Receipt
Mailing Address 6508 North River B	oulevard		12 12 2008
City Tampa	State FL	Zip Code	Transaction ID: 16166552
FEC ID number of contributing federal political committee.	C	33604-6028	Amount of Each Receipt this Period 125.00
Name of Employer St. Joseph's Hospital	Occupation Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	si)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 231 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Donald L Jernigan, , Ph.D. Mailing Address 111 North Orlando Av City Winter Park FEC ID number of contributing federal political committee. Name of Employer Adventist Health System Sunbelt Health Receipt For: Primary General	enue State Zip Code FL 32789-3675 C Occupation President and Chief Executive Office Aggregate Year-to-Date 1000.00	Date of Receipt 1 2 1 2 2 0 0 8 Transaction ID: 16166554 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Ms. Jean Mayer Mailing Address 2408 W. Watrous Ave City Tampa FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital		Date of Receipt 1 2 1 2 2 0 0 8 Transaction ID: 16166556 Amount of Each Receipt this Period 125.00
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr Warren E Jones	Aggregate Year-to-Date ▼ 250.00	Date of Receipt
Mailing Address 1300 Miccosukee Roa City Tallahassee FEC ID number of contributing federal political committee.	State Zip Code FL 32308-5054	Transaction ID: 16166558 Amount of Each Receipt this Period 250.00
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General Other (specify) ▼	Occupation Vice President and Chief Communication Aggregate Year-to-Date 500.00	ation
SUBTOTAL of Receipts This Page (optional)		875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 231 (check only one) X 11a 11b 11c 12
	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Doug Luckett		Date of Receipt
Mailing Address 12877 Pastures Way City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166561
Fort Myers	FL 33913-7633	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Lee Memorial Health System	Occupation Chief Administrative Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John Wieist		Date of Receipt
Mailing Address 2403 South West 43rd		12 12 2008
City	State Zip Code	Transaction ID: 16166564
Cape Coral	FL 33914	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Lee Memorial Hospital	Occupation Chief Financial Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Ms. Sue G Brody	-	Date of Receipt
Mailing Address 701 Sixth Street South	1	12 12 2008
City Saint Petersburg	State Zip Code FL 33701-4891	Transaction ID: 16166566 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Bayfront Medical Center	Occupation President and Chief Executive Officer	r
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
CURTOTAL of Descints This Daws (entired)		875.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 231 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms Ginger Oliver		Date of Receipt
Mailing Address P O Box 1289		12 12 2008
City	State Zip Code	Transaction ID: 16166568
Tampa	FL 33601-1289	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tampa General Hospital	Occupation Vice President Information Systems	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Hugh Greene	Date of Receipt	
Mailing Address 800 Prudential Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166570
<u>Jacksonville</u>	FL 32207-8202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Baptist Health	Occupation President and Chief Executive Office	r
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. George Mikitarian, , Jr.		Date of Receipt
Mailing Address 951 North Washingto	12 12 2008	
City	State Zip Code	Transaction ID: 16166571
Titusville	FL 32796-2163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Parrish Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 231 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Ronald A Hytoff Mailing Address P O Box 1289 City Tampa FEC ID number of contributing federal political committee. Name of Employer Tampa General Hospital Receipt For:	State Zip Code FL 33601-1289 C Occupation President and Chief Executive Office Aggregate Year-to-Date ▼	Date of Receipt M
Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Diane S. Raines Mailing Address 4090 San Jose Boule	1000.00	Date of Receipt
City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166578
<u>Jacksonville</u>	FL 32207-6063	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Baptist Health	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Robert D. Moon		Date of Receipt
Mailing Address PO Box 9400		12 12 2008
City	State Zip Code	Transaction ID: 16166580
Sebring	FL 33871-9400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital Heartland Division Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)	'	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personne name and address of any political committee to s	of for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Steven Short		Date of Receipt
Mailing Address P O Box 1289	7,0,4	12 12 2008
City Tampa	State Zip Code FL 33601-1289	Transaction ID: 16166583 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Executive VP, Finance and Administra	- iti
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James R Nathan		Date of Receipt
Mailing Address 2776 Cleveland Aver	nue	12 12 2008
City	State Zip Code	Transaction ID: 16166584
Fort Myers	FL 33901-5864	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Lee Memorial Health System	Occupation President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	
Full Name (Last, First, Middle Initial) Mr. Jerry Senne		Date of Receipt
Mailing Address 233 Salvador Square)	12 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Winter Park	State Zip Code FL 32789-5618	Transaction ID: 16166589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32703-3010	250.00
Name of Employer Health First, Incorporated	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 231 (check only one) X 11a
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۱.	Full Name (Last, First, Middle Initial) Ms. Kathleen Murray Mailing Address 13286 Stone Pond Dri	·		Date of Receipt
				12 12 2008
	City Jacksonville	State FL	Zip Code 32224-1622	Transaction ID: 16166590 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	OLLET TOLL	125.00
	Name of Employer Baptist Medical Center	Occupation Administr		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Larry J Archbell			Date of Receipt
	Mailing Address 3100 East Fletcher Av	12 12 2008		
	City	State	Zip Code	Transaction ID: 16166595
	Tampa FEC ID number of contributing federal political committee.	C	33613-4613	Amount of Each Receipt this Period 125.00
	Name of Employer University Community Hosp- ital	Occupation Chief Exe	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Marvin Kurtz			Date of Receipt
	Mailing Address 4967 Anniston Circle			12 12 2008
	City	State	Zip Code	Transaction ID: 16166598
	Tampa FEC ID number of contributing federal political committee.	C	33647-2310	Amount of Each Receipt this Period 125.00
	Name of Employer University Community Hosp- ital	Occupation Chief Fin	n ancial Officer	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Г	SUBTOTAL of Receipts This Page (optional)	1		375.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and s	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Tony N Bennett		Date of Receipt
Mailing Address 1847 Florida Avenue		12 12 2008
City Panama City	State Zip Code FL 32405-4640	Transaction ID: 16166600 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer HEALTHSOUTH Emerald Coast Rehabilitati Receipt For: Primary General	Occupation Chief Executive Officer Aggregate Year-to-Date	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Ms. Linda L Brown Mailing Address 14890 Shrike Way		Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166602
Fort Myers	FL 33908-8105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Lee Memorial Hospital	Occupation Trustee	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr George Fayer		Date of Receipt
Mailing Address P O Box 565002, Mail	Stop 1	12 12 2008
City Rockledge	State Zip Code FL 32956-5002	Transaction ID: 16166604
FEC ID number of contributing federal political committee.	FL 32956-5002	Amount of Each Receipt this Period 125.00
Name of Employer Wuesthoff Medical Center - Rockledge Receipt For:	Occupation Chief Financial Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		325.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 231 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr John F Wilbanks Mailing Address 800 Prudential Drive City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Medical Center Receipt For: Primary Other (specify)	State Zip Code FL 32207-8202 C Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Ms. Marianne Hillegass Mailing Address 3561 Sanctuary Blvd. City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Medical Center Receipt For: Primary General Other (specify)	State Zip Code FL 32250-2571 C Occupation Vice President, Operations Aggregate Year-to-Date 300.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Emil P Miller Mailing Address 110 Longwood Avenue City Rockledge FEC ID number of contributing federal political committee. Name of Employer Wuesthoff Health System Receipt For: Primary General Other (specify) ▼	State Zip Code FL 32955-2828 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	775.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 64 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be name and address	pe sold or used by any pers of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Ms. Marilyn Stout Mailing Address 2776 Cleveland Avenu City Fort Myers FEC ID number of contributing	State Z	Zip Code 33901-5855	Date of Receipt M M M
	Name of Employer Lee Memorial Hospital Receipt For: Primary General Other (specify)	Occupation Board Membe Aggregate Year		
 s.	Full Name (Last, First, Middle Initial) Ms. Judith Ploszek Mailing Address 2863 Bayshore Trails	Drive		Date of Receipt 1 2 1 2 2 0 0 8
	City	State 2	Zip Code	Transaction ID: 16166615
	Tampa	FL :	33611-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer Tampa General Hospital	Occupation Vice Presiden		
	Receipt For: Primary General Other (specify)	Aggregate Year	-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Ms. Mary McGillicuddy			Date of Receipt
	Mailing Address 2820 SE 19th Place			12 12 2008
	City		Zip Code 33904-4015	Transaction ID: 16166617
	Cape Coral FEC ID number of contributing federal political committee.	C	33904-4015	Amount of Each Receipt this Period 125.00
	Name of Employer Lee Memorial Hospital	Occupation Chief Legal C	ounsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			375.00

SCHEDULE A (FEC Formation ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 231 (check only one) X
	orts and Statements may not be sold or used by any persor using the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Associatio	n PAC	
Full Name (Last, First, Middle Initia Mr. Kenneth R Mattison	, 	Date of Receipt
Mailing Address 1000 Waterm City	an Way State Zip Code	12 12 2008
Tavares	FL 32778-5266	Transaction ID: 16166619 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital Waterman	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initia Mr. Daryl Tol)	Date of Receipt
Mailing Address 701 West Ply	mouth Avenue	12 12 2008
City	State Zip Code	Transaction ID: 16166630
<u>Deland</u>	FL 32720-3236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital - De Land	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initia Mr. Lars Houmann		Date of Receipt
Mailing Address 601 East Rolli	ns Street	12 12 2008
City	State Zip Code	Transaction ID: 16166631
<u>Orlando</u>	FL 32803-1248	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Florida Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (c	optional)	800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 231 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Steven M Klein Mailing Address 1611 NW 12th Avenue		Date of Receipt 1 2 1 2 2 0 0 8
City Miami	State Zip Code FL 33136-1005	Transaction ID: 1616632
FEC ID number of contributing federal political committee.	FL 33136-1005	Amount of Each Receipt this Period 250.00
Name of Employer Jackson Health System Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President and Chief C Aggregate Year-to-Date 500.00	Ope
Full Name (Last, First, Middle Initial) Ms. Kristy Rigot Mailing Address 12730 Dreden Ct.		Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166634
Fort Myers	FL 33912-4663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Lee Memorial Hospital	Occupation Director of Corporate Staffing	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Deanna Schaefer		Date of Receipt
Mailing Address 16 Remington Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166647
Ormond Beach	FL 32174-2527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Halifax Health Medical Ce- nter	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Jason Moore		Date of Receipt
Mailing Address 2112 Doral Drive City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166649
Tallahassee	FL 32312-3159	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dennis Proul		Date of Receipt
Mailing Address 11873 Wexford Blvd.		12 12 2008
City	State Zip Code	Transaction ID: 16166662
Spring Hill	FL 34609-9260	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Health System	Occupation SVP&CIO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. J. Brian Paradis		Date of Receipt
Mailing Address 1051 Oakpoint Circle		1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166666
<u>Apopka</u>	FL 32712-3704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital	Occupation Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		625.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		625.0

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 231 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Steve Adriaanse		Date of Receipt
Mailing Address 3042 Fermanagh Drive		12 12 2008
City	State Zip Code	Transaction ID: 16166673
Tallahassee	FL 32309-3333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tallahassee Memorial Heal- thCare	Occupation HR Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr Frank Barrett	Date of Receipt	
Mailing Address 1611 NW 12th Avenue)	12 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166676
<u>Miami</u>	FL 33136-1005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Health System	Occupation Executive Vice President Corporate A	Aff
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	1
Full Name (Last, First, Middle Initial)		1
Mr. Eric Peburn		Date of Receipt
Mailing Address 7 Fairvinds Circle		12 12 2008
City	State Zip Code	Transaction ID: 16166679
Ormond Beach	FL 32176-2195	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer Halifax Health Medical Ce- nter	Occupation CFO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		500.00

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 231 (check only one) X
or for comme	on copied from such Reports and St ercial purposes, other than using the COMMITTEE (In Full) In Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mailing Ad	ddress 1511 Algardi Avenue	State FL	Zip Code	Date of Receipt 1 2 1 2 2 0 0 8 Transaction ID: 16166680
federal po	umber of contributing litical committee.	C	33146-1003	Amount of Each Receipt this Period 250.00
Receipt F	Employer Health System or: nary	Occupation Vice Pres		
Full Name Mr Joe Pe		s Blvd		Date of Receipt
City		State	Zip Code	Transaction ID: 16166683
	L Beach umber of contributing litical committee.	C	32114-2709	Amount of Each Receipt this Period 125.00
System Receipt F	Employer community Health or: nary General er (specify)		n Community Relations e Year-to-Date ▼ 250.00	
Full Name	e (Last, First, Middle Initial) Mallah			Date of Receipt
Mailing Ad	ddress P O Box 4227			1 2 1 2 2 0 0 8
City		State	Zip Code	Transaction ID: 16166687
	umber of contributing litical committee.	C	33677-4227	Amount of Each Receipt this Period 250.00
Name of F St. Josep	Employer h's Hospital	Occupatio Presiden	n t and Chief Executive Office	r
	or: nary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL				625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Bonnie Bowls		Date of Receipt
Mailing Address 121 NW Ivanhoe Blvd. City	State Zip Code	12 12 2008
<u>Orlando</u>	FL 32804-5958	Transaction ID: 16166688 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital Associat- ion	Occupation Senior Vice President	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr Gerard A Kaiser, , M.D.		Date of Receipt
Mailing Address 1611 NW 12th Avenue		12 12 2008
City	State Zip Code	Transaction ID: 16166689
<u>Miami</u>	FL 33136-1094	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Health System	Occupation Executive Vice President and Chief Me	od
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Fran Davis		Date of Receipt
Mailing Address 1242 Harbour Point Dr	ive	12 12 2008
City	State Zip Code	Transaction ID: 16166693
Port Orange	FL 32127-5608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer Halifax Health Medical Ce- nter	Occupation Hospice Admin CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		500.00
TOTAL This Period (last page this line number	<u> </u>	

CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and for commercial purposes, other than using t	I Statements may not be sold or used by any pe he name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Olga Dazzo		Date of Receipt
Mailing Address 1111 Crandon Blvd.	A-507	12 12 2008
City Key Biscayne	State Zip Code FL 33149-2623	Transaction ID: 16166695 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33143-2023	250.00
Name of Employer Jackson Health System	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jeff Feasel		Date of Receipt
Mailing Address 303 North Clyde Mo	ris Blvd	12 12 2008
City	State Zip Code	Transaction ID: 16166703
Daytona Beach	FL 32114-2709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Halifax Community Health System	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth Bradley		Date of Receipt
Mailing Address 200 North Lakemont	Avenue	12 12 2008
City Winter Borle	State Zip Code	Transaction ID: 16166708
Winter Park EEC ID number of contributing	FL 32792-3273	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Winter Park Memorial Hosp- ital	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	250.00	
		625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. William G Ulbricht		Date of Receipt
Mailing Address P O Box 12588 City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166710
Saint Petersburg	FL 33733-2588	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer St. Anthony's Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. John Mahoney, MD		Date of Receipt
Mailing Address 2920 Ivanahoe Road		12 12 2008
City	State Zip Code	Transaction ID: 16166711
<u>Tallahassee</u>	FL 32312-2824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tallahassee Memorial Heal- thCare	Occupation Chief Medical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Timothy W Cook	I	Date of Receipt
Mailing Address P O Box 9400		12 12 2008
City	State Zip Code	Transaction ID: 16166713
Sebring	FL 33871-9400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Florida Hospital Heartland Medical Cen	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		625.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u> </u>	625.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee t	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Arvin Lewis		Date of Receipt
Mailing Address 778 Foxhound Drive		12 12 2008
City	State Zip Code	Transaction ID: 16166718
Port Orange	FL 32128-7003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer Halifax Community Health System	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Alfred G Stubblefield		Date of Receipt
Mailing Address 1717 North 'E' Street,	Ste 320	12 12 2008
City	State Zip Code	Transaction ID: 16166719
Pensacola	FL 32501-6377	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Baptist Health Care Corpo- ration	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Ms. Cynthia Blair	.I.	Date of Receipt
Mailing Address 7935 Preservation Ro	ad	12 12 2008
City	State Zip Code	Transaction ID: 16166720
Tallahassee	FL 32312-6766	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tallahassee Memorial Heal- thCare	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 231 (check only one) X
Ai	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> A .	Full Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	Tallahassee FEC ID number of contributing federal political committee.	FL 32311	Amount of Each Receipt this Period 500.00
	Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify)	Occupation Senior Vice President Aggregate Year-to-Date 1000.00	
3.	Full Name (Last, First, Middle Initial) Mr. Stephen Mason Mailing Address 3909 Snapper Pointe I	Drive	Date of Receipt 1 2 1 2 2 0 0 8
	City	State Zip Code	Transaction ID: 16166739
	Tampa FEC ID number of contributing federal political committee.	FL 33611-1030	Amount of Each Receipt this Period 500.00
	Name of Employer BayCare Health System	Occupation President & CEO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Mr Richard Mutarelli		Date of Receipt
	Mailing Address P O Box 6000		12 12 2008
	City	State Zip Code	Transaction ID: 16166741
	Ocala FEC ID number of contributing federal political committee.	FL 34478-6000	Amount of Each Receipt this Period 125.00
	Name of Employer Munroe Regional Medical Center	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
s	SUBTOTAL of Receipts This Page (optional)		1125.00

SCHEDULE A			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 231 (check only one) X
or for commercial purpo	ses, other than using the nan	ments may ne and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, Fir. Mr. Clifford J. Bauer Mailing Address 4	st, Middle Initial) 01 North West 131st Ave	anue		Date of Receipt
City	or worth west forst /we	State	Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166743
Plantation FEC ID number of confederal political com		FL C	33325	Amount of Each Receipt this Period 125.00
Name of Employer North Ridge Medica Receipt For: Primary Other (specify	General		cutive Officer Year-to-Date ▼ 250.00	1
Full Name (Last, Fir	st, Middle Initial)	0 0		Date of Receipt
City Tallahassee		State FL	Zip Code 32308-5093	Transaction ID: 16166749 Amount of Each Receipt this Period
FEC ID number of c	nittee.	C		250.00
Name of Employer Tallahassee Memor thCare Receipt For: Primary Other (specify	al Heal-		ancial Officer and Vice Pres Year-to-Date ▼ 500.00	<u>si</u>
Full Name (Last, Fir Mr. Randall L. Haffne Mailing Address 9	·			Date of Receipt
City	or Grands Circuit	State	Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166752
Maitland FEC ID number of confederal political com		FL C	32751-6900	Amount of Each Receipt this Period 125.00
Name of Employer Florida Hospital		Occupation Chief Ope	erating Officer	
Receipt For: Primary Other (specify	General		Year-to-Date ▼ 250.00	
SUBTOTAL of Receip	ts This Page (optional))	500.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any part and address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Ms. Eddie Soler		Date of Receipt
	Mailing Address 250 Kentucky blue Circ	le	12 12 2008
	City	State Zip Code FL 32712-4767	Transaction ID: 16166753
	Apopka FEC ID number of contributing federal political committee.	FL 32712-4767	Amount of Each Receipt this Period 125.00
	Name of Employer Florida Hospital	Occupation CFO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Charles Gibson Mailing Address 3485 Stately Oaks Lan	ρ	Date of Receipt
			12 12 2008
	City Duluth	State Zip Code GA 30097-5155	Transaction ID: 16166755 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 30097-5133	250.00
	Name of Employer Marshall Erdman & Associa- tes	Occupation Director of Business Developmen	nt .
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Robert A. Malson		Date of Receipt
-	Mailing Address 1850 Redwood Terrace	e, NW	12 11 2008
	City	State Zip Code	Transaction ID: 16167429
	Washington FEC ID number of contributing	DC 20012-1023	Amount of Each Receipt this Period 350.00
	Name of Employer District of Columbia Hosp- ital Associat	Occupation President & Chief Executive Office	eer
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		725.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Michael D Connelly Mailing Address 615 Elsinore Place City Cincinnati FEC ID number of contributing federal political committee. Name of Employer Catholic Healthcare Partners Receipt For: Primary General Other (specify)	State Zip Code OH 45202-1459 C Occupation President and Chief Executive Officel Aggregate Year-to-Date 1000.00	Date of Receipt 1 2 1 0 2 0 0 8 Transaction ID: 16167438 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Mr. Matthew D. Williams Mailing Address 615 Elsinore Place City Cincinnati FEC ID number of contributing federal political committee. Name of Employer Catholic Healthcare Partn-	State Zip Code OH 45202-1459 C Occupation	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ers Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. James R. Gravell	VP, Advocacy and Government Relation Aggregate Year-to-Date ▼ 500.00	Date of Receipt
Mailing Address 2615 East High Street City Springfield	State Zip Code OH 45505-1412	Transaction ID: 16167441 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Springfield Regional Medical Center - Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00]
SUBTOTAL of Receipts This Page (optional)		2000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael Bezney Mailing Address 615 Elsinore Place City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Cincinnati FEC ID number of contributing federal political committee.	OH 45202-1459	Amount of Each Receipt this Period 500.00
Name of Employer Catholic Healthcare Partners Receipt For: Primary General Other (specify) ▼	Occupation Senior VP, General Counsel Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Ms. Marie Beatrice Grause, RN, JD Mailing Address 1580 North Street		Date of Receipt 1 2 1 1 2 2 0 0 8
City Montpelier	State Zip Code VT 05602-2997	Transaction ID: 16173255 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Vermont Association of Ho- spitals & Hea Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr. Harvey M Yorke		Date of Receipt
Mailing Address 100 Hospital Drive	e East	12 / 11 / 2008
City Bennington	State Zip Code VT 05201-5004	Transaction ID: 16173258 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Southwestern Vermont Medi- cal Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	nal)	1850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 231 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the such as	Statements may not be sold or used by any persor he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Mr. Vincent J McCorkle, , CHE		Date of Receipt
Mailing Address P O Box 9012		12 15 2008
City Springfield	State Zip Code MA 01102-9012	Transaction ID: 16173274 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Mercy Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Eileen Dohmann		Date of Receipt
Mailing Address 6508 Flowerdew Hur	ndred Ct.	12 11 YYYY 12 11 2008
City	State Zip Code	Transaction ID: 16173279
Centreville FEC ID number of contributing federal political committee.	VA 20120-3755	Amount of Each Receipt this Period 75.00
Name of Employer Mary Washington Hospital	Occupation Vice President, Nursing	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
Full Name (Last, First, Middle Initial) Dr. Robert Reid, , M.D.	<u> </u>	Date of Receipt
Mailing Address P O Box 689		1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16173280
Santa Barbara FEC ID number of contributing federal political committee.	CA 93102-0689	Amount of Each Receipt this Period 500.00
Name of Employer Cottage Health System	Occupation Director Medical Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		925.00

or for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Associatio Full Name (Last, First, Middle Initial Mr. Thomas C Porter Mailing Address 91 Titicut Rd City Raynham FEC ID number of contributing federal political committee. Name of Employer Morton Hospital and Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Streeting Address	State Zip Code MA 2767 C Occupation President Aggregate Year-to-Date ▼ 1000.00 Rd State Zip Code CA 92075-1811	Date of Receipt Date of Receipt
A. American Hospital Association Full Name (Last, First, Middle Initial Mr. Thomas C Porter Mailing Address 91 Titicut Rd City Raynham FEC ID number of contributing federal political committee. Name of Employer Morton Hospital and Medical Center Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Streetly) Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Streetly)	State Zip Code MA 2767 C Occupation President Aggregate Year-to-Date ▼ 1000.00 Rd State Zip Code CA 92075-1811	Transaction ID: 16173281 Amount of Each Receipt this Period Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. Thomas C Porter Mailing Address 91 Titicut Rd City Raynham FEC ID number of contributing federal political committee. Name of Employer Morton Hospital and Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Streeting City	State Zip Code MA 2767 C Occupation President Aggregate Year-to-Date ▼ 1000.00 Rd State Zip Code CA 92075-1811	Transaction ID: 16173281 Amount of Each Receipt this Period Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Raynham FEC ID number of contributing federal political committee. Name of Employer Morton Hospital and Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healfhcare Strategies Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Streetity	MA 2767 C Occupation President Aggregate Year-to-Date ▼ 1000.00 Rd State Zip Code CA 92075-1811	Transaction ID: 16173281 Amount of Each Receipt this Period 1000.00 Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Raynham FEC ID number of contributing federal political committee. Name of Employer Morton Hospital and Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Streetity	MA 2767 C Occupation President Aggregate Year-to-Date ▼ 1000.00 Rd State Zip Code CA 92075-1811	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Morton Hospital and Medical Center Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Streetity	Occupation President Aggregate Year-to-Date ▼ 1000.00 Rd State Zip Code CA 92075-1811	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
al Center Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Street.	President Aggregate Year-to-Date ▼ 1000.00 Rd State Zip Code CA 92075-1811	Transaction ID: 16173294 Amount of Each Receipt this Period
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Stree City	1000.00 Rd State Zip Code CA 92075-1811	Transaction ID: 16173294 Amount of Each Receipt this Period
Mr. Gary D. Aden Mailing Address 636 San Julio City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Street	Rd State Zip Code CA 92075-1811	Transaction ID: 16173294 Amount of Each Receipt this Period
City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Street	State Zip Code CA 92075-1811	Transaction ID: 16173294 Amount of Each Receipt this Period
Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healfhcare Strategies Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Street	CA 92075-1811	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Street		
Integrated Healfhcare Strategles Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Stree	C	
Primary General Other (specify) Full Name (Last, First, Middle Initial Mr. John B. Day Mailing Address 101 Page Stree	Occupation Senior Vice President, Consultant	
Mr. John B. Day Mailing Address 101 Page Stree City	Aggregate Year-to-Date ▼ 1000.00	
City		Date of Receipt
-	et	1 2 1 5 2 0 0 8
	State Zip Code	Transaction ID: 16173305
New Bedford FEC ID number of contributing federal political committee.	MA 02740-3400	Amount of Each Receipt this Period 500.00
Name of Employer Southcoast Hospitals Group	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (o	500.00	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 231 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	/ not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	,,,	
Full Name (Last, First, Middle Initial) Ms. Catherine M. Crowley			Date of Receipt
Mailing Address 2100 Poplar Ridge	Road		12 15 2008
City Pasadena	State MD	Zip Code 21122-3820	Transaction ID: 16175335 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21122 0020	600.00
Name of Employer Maryland Hospital Associa- tion	Occupation Assistant	n : Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth A Samet			Date of Receipt
Mailing Address 5565 Sterrett Place	M M / D D / Y Y Y Y Y Y 1 1 2 1 5 2 0 0 8		
City Columbia	State MD	Zip Code 21044-2665	Transaction ID: 16175337 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21011 2000	1000.00
Name of Employer MedStar Health	Occupation	n t and Chief Operating Office	- r
Receipt For: Primary General Other (specify) ▼	''	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. William G Robertson			Date of Receipt
Mailing Address 1801 Research Blv	d, Ste 400		M M / D D / Y Y Y Y Y Y 1 1 2 1 5 2 0 0 8
City Rockville	State MD	Zip Code 20850-3184	Transaction ID: 16175338
FEC ID number of contributing federal political committee.	C	20000-3104	Amount of Each Receipt this Period 500.00
Name of Employer Adventist HealthCare	Occupation Presiden	n t and Chief Executive Officer	,
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 625.00	
SUBTOTAL of Receipts This Page (optional	al)		2100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Judith Feustle Mailing Address 1550 Doxbury Rd City Baltimore FEC ID number of contributing federal political committee. Name of Employer Union Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code MD 21286-5903 C Occupation Board Member Aggregate Year-to-Date ▼	Date of Receipt M M
Full Name (Last, First, Middle Initial) Ms. Laurie A Brown Mailing Address 5204 Ridge Drive NE City Tacoma FEC ID number of contributing federal political committee. Name of Employer Franciscan Health System Receipt For: Primary General Other (specify)	State Zip Code WA 98422-1525 C Occupation Director Care Management Services Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D M 2 0 0 8 Transaction ID: 16176022 Amount of Each Receipt this Period 175.00
Full Name (Last, First, Middle Initial) Ms. Nancy Steiger Mailing Address 2543 Mt. Baker Highw. City Bellingham FEC ID number of contributing federal political committee. Name of Employer St. Joseph Hospital Receipt For: Primary General Other (specify)	State Zip Code WA 98226-9566 C Occupation Chief Executive Officer Aggregate Year-to-Date 675.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		650.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 231 (check only one) X
0	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Richard A Bryan Mailing Address 1035 116th Avenue No	rtheast		Date of Receipt 1 2 1 1 2 2 0 0 8
	City Bellevue	State WA	Zip Code 98004-4604	Transaction ID: 16176110 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Overlake Hospital Medical Center Receipt For: Primary General Other (specify) ▼		n A Patient Safety Chief Complete Year-to-Date ▼	lia
 3.	Full Name (Last, First, Middle Initial) Mr. James C Cannon Mailing Address 12844 Military Road Sc	outh		Date of Receipt 1 2 1 1 2 2 0 0 8
	City	State	Zip Code	Transaction ID: 16176111
	Seattle FEC ID number of contributing federal political committee.	C	98168-9981	Amount of Each Receipt this Period 250.00
	Name of Employer Regional Hospital for Res- piratory and Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n rator and Chief Executive Of Year-to-Date ▼ 250.00	ffi]
_	Full Name (Last, First, Middle Initial) Ms. Patricia Cochrell			Date of Receipt
	Mailing Address 23986 Vinland Terr NW	V		12 11 2008
	City Poulsbo	State WA	Zip Code 98370-9416	Transaction ID: 16176112 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Harrison Medical Center	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using t	I Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Medrice Coluccio		Date of Receipt
Mailing Address P O Box 3002 City	State Zip Code	1 2
Longview	WA 98632-0302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Medical Center	Occupation Chief Executive Officer	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Patricia Degroodt		Date of Receipt
Mailing Address 1330 Rockefeller P.O. Box 1147		12 / 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16176190
Everett	WA 98201-1684	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Providence Health System/- NWSA	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Dan Dixon		Date of Receipt
Mailing Address 747 Broadway Aven		12 11 2008
City	State Zip Code	Transaction ID: 16176191
Seattle	WA 98122-4379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Swedish Health Services	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line numb	·	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for eacl	parate schedule(s) h category of the d Summary Page	FOR LINE NUMBER: PAGE 85 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	any information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be so name and address of an	ld or used by any perso y political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Gerard Fischer			Date of Receipt
	Mailing Address 5909 West Pima Cour	-		12 11 2008
	City Spokane	State Zip C WA 9920	ode 8-9010	Transaction ID: 16176192 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 3320	0 0010	250.00
	Name of Employer Sacred Heart Medical Cent- er	Occupation Vice President- Sy	ystems Developmei	nt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-D	ate ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Harold S Geller			Date of Receipt
	Mailing Address 315 North 14th Street			1 2 1 1 2 0 0 8
	City	State Zip C		Transaction ID: 16176193
	Othello	WA 9934	4-1297	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Othello Community Hospital	Occupation Administrator		
	Receipt For:	Aggregate Year-to-D	ate V	
	Primary General Other (specify) ▼		250.00]
с. С.	Full Name (Last, First, Middle Initial) Mr. Stuart Hennessey			Date of Receipt
	Mailing Address 14432 SE Eastgate W	ay, Ste 300		12 11 2008
	City	State Zip C		Transaction ID: 16176194
	Bellingham	WA 9800	7-6412	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer PeaceHealth	Occupation Senior Vice President	dent Legal Services	a
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	ate ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00
F	TOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Judy Hodgson Mailing Address 2830 206th Terrace	ME	Date of Receipt
City	State Zip Code	1 2 1 1 2 0 0 8 Transaction ID: 16176195
Sammamish	WA 98074-4369	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer PeaceHealth	Occupation Sr. Vice President, Organizational Dev	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Barbara Hostetler		Date of Receipt
Mailing Address 12844 Military Road		12 11 2008
City	State Zip Code	Transaction ID: 16176196
<u>Tukwila</u>	WA 98168-3045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Regional Hospital for Res- piratory and	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Mariel S Kagan, , R.N., MS		Date of Receipt
Mailing Address 2520 Cherry Avenue		12 11 2008
City	State Zip Code	Transaction ID: 16176197
Bremerton	WA 98310-4229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Harrison Medical Center	Occupation Vice President and Legal Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		730.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 231 (check only one) X 11a 11b 11c 12 15 16 16
Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) American Hospital Association P	and Statements may not be sold or used by any persor ng the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joseph M Kortum Mailing Address P O Box 1600		Date of Receipt
City Vancouver	State Zip Code WA 98668-1600	Transaction ID: 16176198 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Southwest Washington Medi-	Occupation	250.00
cal Center Receipt For: Primary Other (specify) ▼	President and Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Skip Kriz Mailing Address 3370 Lakeview D	rive	Date of Receipt
City	State Zip Code	1 2 1 1 2 0 0 8 Transaction ID: 16176200
<u>Eugene</u>	OR 97408-7207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer PeaceHealth	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Kruse	,	Date of Receipt
Mailing Address 6860 NW RAnge	r Way	12 / 11 / 2008
City <u>S</u> ilverdale	State Zip Code WA 98383-6306	Transaction ID: 16176201 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Harrison Medical Center	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optic	onal)	750.00

Full Mr. Mail City Olly FEC fede	ommercial purposes, other than using the ME OF COMMITTEE (In Full) Iterican Hospital Association PAC Name (Last, First, Middle Initial) James Leonard Ing Address 413 Lilly Road NE Impia C ID number of contributing eral political committee. The of Employer vidence St. Peter Hospelipt For:	Statements may not be sold or used by any perse name and address of any political committee to see name and address of a see name and address of	Date of Receipt Date of Receipt Transaction ID: 16176202 Amount of Each Receipt this Period 250.00
Full Mr. Mai City Oly FEC fede	Name (Last, First, Middle Initial) James Leonard ing Address 413 Lilly Road NE Impia C ID number of contributing eral political committee. The of Employer vidence St. Peter Hosp- eipt For:	WA 98506-5166 C Occupation	Transaction ID: 16176202 Amount of Each Receipt this Period
Mr. Mai City Oly FEC fede Nan Pro ital	James Leonard ling Address 413 Lilly Road NE Implia C ID number of contributing eral political committee. The of Employer vidence St. Peter Hospelipt For:	WA 98506-5166 C Occupation	Transaction ID: 16176202 Amount of Each Receipt this Period
City Oly FEC fede Nar Pro ital	rmpia C ID number of contributing eral political committee. The of Employer vidence St. Peter Hospelieipt For:	WA 98506-5166 C Occupation	Transaction ID: 16176202 Amount of Each Receipt this Period
FEC fede Nan Pro ital	DID number of contributing eral political committee. The of Employer vidence St. Peter Hospeleipt For:	Occupation	
fede Nan Pro ital	eral political committee. ne of Employer vidence St. Peter Hosp- eipt For:	Occupation	250.00
<u>ital</u>	eipt For:	l '	
Red	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Name (Last, First, Middle Initial) Chuck Lytle		Date of Receipt
	ing Address 747 Broadway Avenu		12 11 2008
City		State Zip Code	Transaction ID: 16176203
<u>Sea</u>	attle	WA 98122-4379	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	С	250.00
Nan Swe	ne of Employer edish Health Services	Occupation Administrator	
Red	eipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
	Name (Last, First, Middle Initial) Russell M. Myers	1	Date of Receipt
	ing Address 2908 Shelton Avenue		12 11 2008
City		State Zip Code	Transaction ID: 16176204
	kima	WA 98902-4073	Amount of Each Receipt this Period
	CID number of contributing eral political committee.	С	250.00
Yak <u>spit</u>		Occupation Vice President	
Rec	eipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
SUBT	OTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 231 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Andrea Nenzel Mailing Address 14432 SE Eastgate W	/ay	Date of Receipt 1 2
City	State Zip Code	Transaction ID: 16176205
Bellevue	WA 98007-6493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer PeaceHealth	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Gregory D. Sawyer, MD, PhD. Mailing Address 11503 Sara Loop Roa	.l	Date of Receipt
·		12 11 2008
City	State Zip Code	Transaction ID: 16176206
Yakima FEC ID number of contributing federal political committee.	WA 98908	Amount of Each Receipt this Period 250.00
Name of Employer Yakima Valley Memorial Ho- spital	Occupation Director, Organizational Health Willi	ne
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Preston M Simmons	I	Date of Receipt
Mailing Address 1321 Colby Avenue		12 11 2008
City	State Zip Code	Transaction ID: 16176207
Everett	WA 98201-1665	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Providence Regional Medic- al Center Eve	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
or fo	information copied from such Reports and Stor commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\right\) '	American Hospital Association PAC			
<u>!</u>	Full Name (Last, First, Middle Initial) Mr. Jon D Smiley			Date of Receipt
_	Mailing Address Sunnyside Community PO Box 719	Hospital		12 11 2008
	City Sunnyside	State WA	Zip Code 98944	Transaction ID: 16176208 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	С		250.00
	Name of Employer Sunnyside Community Hospi- al	Occupation Chief Exe	n ecutive Officer	
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. James Trull			Date of Receipt
ľ	Mailing Address 1016 Tacoma Avenue	12 11 2008		
	City	State	Zip Code	Transaction ID: 16176209
F	Sunnyside FEC ID number of contributing ederal political committee.	C	98944-2263	Amount of Each Receipt this Period 250.00
	Name of Employer Sunnyside Community Hospi- al	Occupation Trustee	n	
_	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Mr. Henry Turner			Date of Receipt
ľ	Mailing Address 1654 103rd S.E.			1 2 1 1 2 0 0 8
	City	State	Zip Code	Transaction ID: 16176210
F	Bellevue FEC ID number of contributing ederal political committee.	C	98004-7001	Amount of Each Receipt this Period 250.00
1	Name of Employer Swedish Health Services	Occupation Chairman		7
F	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
611	BTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John Wallen Mailing Address 2520 Cherry Avenue City Bremerton FEC ID number of contributing federal political committee. Name of Employer Harrison Medical Center Receipt For:	State Zip Code WA 98310-4229 C Occupation CEO Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Kim Williams	250.00	Date of Receipt
Mailing Address 2815 Kayak View Place City Camano Island	State Zip Code	1 2 1 1 2 0 0 8 Transaction ID: 16176212
FEC ID number of contributing federal political committee.	WA 98282-5022	Amount of Each Receipt this Period 250.00
Name of Employer Providence Regional Medic- al Center Eve Receipt For: Primary General Other (specify) ▼	Occupation Interim CNE Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Rand J Wortman		Date of Receipt
Mailing Address 888 Swift Boulevard	01-12 7'- 0-12	12 11 2008
City <u>Richland</u>	State Zip Code WA 99352-3542	Transaction ID: 16176213 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Kadlec Medical Center	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 231 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG			
Full Name (Last, First, Middle Initial) Ms. Elaine Couture			Date of Receipt
Mailing Address 101 West Eighth A	12 11 2008		
City Spokane	State WA	Zip Code	Transaction ID: 16176214
FEC ID number of contributing federal political committee.	C	99204-2307	Amount of Each Receipt this Period 300.00
Name of Employer Sacred Heart Medical Cent-	Occupation Vice Pres		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Florence Chang			Date of Receipt
Mailing Address 315 Martin Luther h	12 11 2008		
City Tacoma	State WA	Zip Code 98405-4234	Transaction ID: 16176215
FEC ID number of contributing federal political committee.	C	90400-4204	Amount of Each Receipt this Period 325.00
Name of Employer MultiCare Health System	Occupation Administ		
Receipt For: Primary General Other (specify) ▼	- + +	e Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Gregg A Davidson			Date of Receipt
Mailing Address P O Box 1376			M M / D D / Y Y Y Y Y Y Y 1 2 0 0 8
City Mount Vernon	State WA	Zip Code	Transaction ID: 16176216
FEC ID number of contributing federal political committee.	C	98273-1376	Amount of Each Receipt this Period 350.00
Name of Employer Skagit Valley Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
			975.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 231 (check only one) X
or fo	rinformation copied from such Reports and Stor commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\. [Full Name (Last, First, Middle Initial) Mr. Ronald O'Halloran Mailing Address 36 Klondike Road City	State	Zip Code	Date of Receipt 1 2 1 1 2 0 0 8 Transaction ID: 16176217
Ī	Republic FEC ID number of contributing rederal political committee.	C	99166-9701	Amount of Each Receipt this Period 350.00
	Name of Employer Ferry County Memorial Hos- pital Receipt For: Primary General Other (specify)	Occupatio Administ Aggregate		
3.	Full Name (Last, First, Middle Initial) Mr. John R White Mailing Address 801 East Wheeler Roa	d		Date of Receipt
-	City	State	Zip Code	Transaction ID: 16176218
-	Moses Lake	WA	98837-1820	Amount of Each Receipt this Period
1	FEC ID number of contributing ederal political committee.	C		350.00
	Name of Employer Samaritan Healthcare	Occupatio Presiden	n t and Chief Executive Office	r
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr. Scott E. Armstrong			Date of Receipt
ı	Mailing Address 3855 44th Avenue NE			12 11 2008
	City	State	Zip Code	Transaction ID: 16176219
Ī	Seattle FEC ID number of contributing rederal political committee.	C	98105-5448	Amount of Each Receipt this Period 500.00
	Name of Employer Group Health Eastside Hos- pital	Occupatio Executive	n e Vice President	
1	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
su	BTOTAL of Receipts This Page (optional)			1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 231 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. David T. Brooks		Date of Receipt
Mailing Address 1321 Colby Avenue	State 7's Code	12
City Everett	State Zip Code WA 98201-1600	Transaction ID: 16176228 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30201 1000	500.00
Name of Employer Providence Health System/- NWSA	Occupation CEO	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Victoria S. Galanti		Date of Receipt
Mailing Address 300 Elliott Avenue W. Ste. 300		12 11 2008
City	State Zip Code	Transaction ID: 16176229
Seattle FEC ID number of contributing federal political committee.	WA 98119-4198	Amount of Each Receipt this Period 500.00
Name of Employer Washington State Hospital Association	Occupation Executive Vice President	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Rodney F Hochman, , M.D.		Date of Receipt
Mailing Address 747 Broadway Avenue		12 11 2008
City	State Zip Code	Transaction ID: 16176230
Seattle FEC ID number of contributing federal political committee.	WA 98122-4379	Amount of Each Receipt this Period 500.00
Name of Employer Swedish Health Services	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number of		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Calvin K Knight Mailing Address 747 Broadway Avenue City	State Zip Code	Date of Receipt M
Seattle FEC ID number of contributing federal political committee. Name of Employer	WA 98122-4307 C Occupation	Amount of Each Receipt this Period 500.00
Name of Employer Swedish Health Services Receipt For: Primary General Other (specify) ▼	Chief Operating Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Marcel C Loh Mailing Address 500 17th Avenue		Date of Receipt
City	State Zip Code	Transaction ID: 16176232
Seattle	WA 98124-5711	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Swedish Medical Center-Ch- erry Hill Cam	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Peter Morgan		Date of Receipt
Mailing Address 2700 125nd Avenue N		12 11 2008
City Redmond	State Zip Code WA 98052	Transaction ID: 16176233 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Group Health Eastside Hos- pital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .	1	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 231 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John T Evans, , Jr. Mailing Address P O Box 1887 City Wenatchee FEC ID number of contributing federal political committee. Name of Employer Central Washington Hospital Receipt For: Primary General Other (specify)	State Zip Code WA 98807-1887 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 520.00	Date of Receipt 1 2
Full Name (Last, First, Middle Initial) Mr. Gary V Peck Mailing Address 3312 Watts Lake Road City Valley FEC ID number of contributing federal political committee. Name of Employer St. Joseph Hospital Receipt For: Primary General Other (specify)	State Zip Code WA 99181-9777 C Occupation Interim Administrator Aggregate Year-to-Date 750.00	Date of Receipt M M D D 2 0 0 8
Full Name (Last, First, Middle Initial) Mr. C. Scott Bond Mailing Address 914 South Scheuber F City Centralia FEC ID number of contributing federal political committee. Name of Employer Providence St. Peter Hospital Receipt For: Primary General Other (specify)	State Zip Code WA 98531-9027 C Occupation CEO Aggregate Year-to-Date 500.00	Date of Receipt M M D D 2 0 0 8
SUBTOTAL of Receipts This Page (optional)		1770.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Gary L. Bebow, , FACHE Mailing Address 914 Eagle Mountain E City Batesville FEC ID number of contributing federal political committee. Name of Employer White River Medical Center	State Zip Code AR 72501-4218 C Occupation Administrator and Chief Executive Of	Date of Receipt 1 2 1 5 2 0 0 8 Transaction ID: 16176273 Amount of Each Receipt this Period 227.50
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr. Roger M. Busfield Mailing Address 419 Natural Resource	es Dr	Date of Receipt 1 2 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 16176276
Little Rock FEC ID number of contributing federal political committee.	AR 72205-1576	Amount of Each Receipt this Period 325.00
Name of Employer Arkansas Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation President Emeritus Aggregate Year-to-Date 325.00	
Full Name (Last, First, Middle Initial) Mr. Bob S. Ellzey, FACHE		Date of Receipt
Mailing Address 311 North Morrow Str	eet	1 2 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 16176304
<u>Mena</u>	AR 71953-2516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Mena Regional Health Syst- em	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
SUBTOTAL of Receipts This Page (optional)		780.00

	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James L. Magee Mailing Address 1206 Gordon Ducky	worth Drive	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Piggott	State Zip Code AR 72454-1911	Transaction ID: 16176320 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	227.50
Name of Employer Piggott Community Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date 227.50	
Full Name (Last, First, Middle Initial) Mr. Ray Kordsmeier Mailing Address 1023 Oak St.		Date of Receipt
City	State Zip Code	Transaction ID: 16176346
Conway FEC ID number of contributing federal political committee.	AR 72032-4354	Amount of Each Receipt this Period 227.50
Name of Employer Conway Regional Medical Center	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mary Franco		Date of Receipt
Mailing Address 684 Valley Rd		1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16176459
New Canaan FEC ID number of contributing federal political committee.	CT 06840-3335	Amount of Each Receipt this Period 250.00
Name of Employer Norwalk Hospital	Occupation VP Public Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	J)	705.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 231 (check only one) X
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) David Schultz			Date of Receipt
	Mailing Address 1035 116th Avenue No	ortheast		12 11 2008
	City	State	Zip Code	Transaction ID: 16176470
	Bellevue	WA	98004-4604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Overlake Hospital Medical Center	Occupation	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
— В.	Full Name (Last, First, Middle Initial) Barbara Watanabe	1		Date of Receipt
	Mailing Address 1717 South J Street			12 11 2008
	City	State	Zip Code	Transaction ID: 16176481
	Tacoma	WA	98405-4933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Franciscan Health System	Occupation Board Me		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
С. С.	Full Name (Last, First, Middle Initial) Mr. Timothy J Goldfarb	1		Date of Receipt
	Mailing Address 1600 SW Archer Road			1 2 1 6 2 0 0 8
	City	State	Zip Code	Transaction ID: 16176490
	Gainesville	FL	32610-3003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Shands HealthCare	Occupation Chief Exc	n ecutive Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		1500.00
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persien name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Terry R. Owen Mailing Address 2520 Fox Squirrel Co City Apopka FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Receipt For:	State Zip Code FL 32712-2513 C Occupation Chief Operating Officer Aggregate Year-to-Date	Date of Receipt 1 2 1 6 2 0 0 8 Transaction ID: 16176492 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Zeff Ross	250.00	Date of Receipt
Mailing Address 703 North Flamingo I City	State Zip Code	1 2 1 6 2 0 0 8 Transaction ID: 16176495
Pembroke Pines FEC ID number of contributing federal political committee.	FL 33028-1006	Amount of Each Receipt this Period 1000.00
Name of Employer Memorial Hospital West Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President, Operations Aggregate Year-to-Date 1000.00]
Full Name (Last, First, Middle Initial) Mr. Joe Johnson		Date of Receipt
Mailing Address 1055 Saxon Bouleval	rd State Zip Code	1 2 1 6 2 0 0 8 Transaction ID: 16176496
Orange City FEC ID number of contributing	FL 32763-8468	Amount of Each Receipt this Period
federal political committee. Name of Employer Florida Hospital Fish Mem-	Occupation	500.00
Florida Hospital Fish Memorial Receipt For: Primary General Other (specify)	President and Chief Executive Office Aggregate Year-to-Date ▼ 500.00	<u>r</u>
	•	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 231 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Timothy P Menton Mailing Address 2291 SW 76th Lane City Ocala FEC ID number of contributing federal political committee. Name of Employer Villages Regional Hospita- I, The	State Zip Code FL 34476-6774 C Occupation Chief Executive Officer	Date of Receipt 1 2 1 6 2 0 0 8 Transaction ID: 16176498 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 250.00	
Paul Betz, , FACHE Mailing Address 3024 Stadium Bouleva		Date of Receipt 1 2 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 16176500
Jonesboro FEC ID number of contributing federal political committee.	AR 72401-7493	Amount of Each Receipt this Period 65.00
Name of Employer NEA Baptist Memorial Hosp- ital Receipt For:	Occupation CEO Aggregate Year-to-Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr. Darren Caldwell		Date of Receipt
Mailing Address P O Box 32		12 / 15 / 4 4 4 4 4
City De Witt	State Zip Code AR 72042-0032	Transaction ID: 16176501
FEC ID number of contributing federal political committee.	C 72042-0032	Amount of Each Receipt this Period 65.00
Name of Employer DeWitt Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50	
SUBTOTAL of Receipts This Page (optional)	1	380.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 231 (check only one) X 11a
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Terry Shaw		Date of Receipt
•	Mailing Address 111 North Orlando Ave	enue	1 2 1 6 2 0 0 8
	City Fort Worth	State Zip Code FL 32789-3675	Transaction ID: 16176518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Adventist Health System Sunbelt Health Receipt For: Primary General Other (specify)	Occupation Chief Financial Officer Aggregate Year-to-Date 500.00	
	Full Name (Last, First, Middle Initial) Mr. John R Harding Mailing Address 7050 Gall Boulevard		Date of Receipt
	City	State Zip Code	1 2 1 6 2 0 0 8 Transaction ID: 16176523
	Zephyrhills	FL 33541-1347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Florida Hospital Zephyrhi- Ils	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
-	Full Name (Last, First, Middle Initial) Mr. Bruce J. Rueben	<u> </u>	Date of Receipt
	Mailing Address 306 East College Aver	nue	1 2 1 6 2 0 0 8
	City Tallahassee	State Zip Code FL 32301-1522	Transaction ID: 16176525 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Florida Hospital Associat- ion	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1003.52	
Γ,	SUBTOTAL of Receipts This Page (optional)		1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Frances Margolin Mailing Address One North Franklin City Chicago FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify)	State Zip Code IL 60606-3436 C Occupation Vice President, Operations HRET Aggregate Year-to-Date 500.00	Date of Receipt 12
Full Name (Last, First, Middle Initial) Ms. Deborah F. Weiner Mailing Address 11004 Petersborough City Rockville FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt Receipt For:		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain City New Hope FEC ID number of contributing	975.00 n Road State Zip Code PA 18938-5760 C	Date of Receipt M M
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. VP., Health Economics Aggregate Year-to-Date 365.03	
SUBTOTAL of Receipts This Page (optional)		84.42

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr			Date of Receipt
	Mailing Address 2378 Orchard Crest Bl City	vd. State	Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16177000
	Manasquan	NJ	08736-4001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Info	n ormation Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
- В.	Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper			Date of Receipt
	Mailing Address 121 Clear Creek Road			12 12 2008
	City	State	Zip Code	Transaction ID: 16177003
	<u>Langhorne</u>	PA	19047-2306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice Pres	n sident, Human Resources	
	Receipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 240.00	
-).	Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein	1		Date of Receipt
	Mailing Address 27 Harvest Lane			12 12 2008
	City	State	Zip Code	Transaction ID: 16177007
	<u>Livingston</u>	NJ	07039-2750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5.00
	Name of Employer New Jersey Hospital Assoc- iation		sident Continuing Care Servi	се
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		230.00	
ſ	SUBTOTAL of Receipts This Page (optional)			15.00
-	SOBTOTAL OF NECERPLS THIS Page (OPHONAL)			
	\ensuremath{TOTAL} This Period (last page this line number	only)	>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 231 (check only one) X
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may re e name and addre	not be sold or used by any pers ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs			Date of Receipt
	Mailing Address 23 E. Delaware Avenu			12 12 2008
	City Pennington	State NJ	Zip Code 08534-2302	Transaction ID: 16177017 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation General Co	ounsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 300.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.			Date of Receipt
	Mailing Address 4 Poppy Lane			12 12 2008
	City	State	Zip Code	Transaction ID: 16177042
	Howell FEC ID number of contributing federal political committee.	NJ C	07731-1451	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation VP Health	Economics	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 240.00	
_ ;.	Full Name (Last, First, Middle Initial) Ms. Valerie Sellers			Date of Receipt
	Mailing Address 82 Millers Grove Road	d		12 12 2008
	City	State	Zip Code	Transaction ID: 16177043
	Belle Mead FEC ID number of contributing federal political committee.	NJ C	08502-4306	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Senior V.P	., Health Planning & Rese	ar¢
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 360.00	
	SUBTOTAL of Receipts This Page (optional) .			15.00
	SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number			13.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 231 (check only one) X 11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steven J. Summer Mailing Address 7335 East Orchard Ro Suite 100 City Greenwood Village FEC ID number of contributing federal political committee. Name of Employer Colorado Hospital Association Receipt For: Primary General Other (specify)	State Zip Code CO 80111-2582 C Occupation President & Chief Executive Officer Aggregate Year-to-Date 600.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas O. Barnes Mailing Address 1900 Perkins St. City Bristol FEC ID number of contributing federal political committee. Name of Employer Bristol Hospital Receipt For: Primary General Other (specify)	State Zip Code CT 06010-8924 C Occupation Chairman of the Board Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. John Hanshaw Mailing Address 1200 East 3900 South City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer HCA - Mountain Division Receipt For: Primary General Other (specify)	State Zip Code UT 84124-1390 C Occupation President Aggregate Year-to-Date 1000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James Butler, III Mailing Address 1476 Stonegate Lane City East Lansing FEC ID number of contributing federal political committee. Name of Employer Sparrow Hospital Receipt For: Primary General Other (specify)	State Zip Code MI 48823-2172 C Occupation Vice Chairman Aggregate Year-to-Date 350.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr John A DiAngelo Mailing Address 105 Pancoast Place City Mullica Hill FEC ID number of contributing federal political committee. Name of Employer South Jersey Healthcare Receipt For: Primary Other (specify)	State Zip Code NJ 08062-4735 C Occupation Senior Vice President Finance and Cl Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr Marc H Lory Mailing Address 1350 Campus Parkway City Wall Township FEC ID number of contributing federal political committee. Name of Employer Meridian Health Receipt For: Primary General Other (specify)	State Zip Code NJ 07753-6821 C Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		850.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	
0	r for commercial purposes, other than using the	Statements may not be sold or used by any ename and address of any political commi	person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
	Mailing Address 23 E. Delaware Avenu		12 19 2008
	City Pennington	State Zip Code NJ 08534-2302	Transaction ID: 16178338
	FEC ID number of contributing federal political committee.	C 00004-2002	Amount of Each Receipt this Period 70.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 370.0	00 "
- 3.	Full Name (Last, First, Middle Initial) Mr. David P. Lavins		Date of Receipt
	Mailing Address 10 Fox Chase Road		12 19 2008
	City	State Zip Code	Transaction ID: 16178342
	Malvern FEC ID number of contributing federal political committee.	PA 19355-3441	Amount of Each Receipt this Period 370.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 490.0	00 "
_	Full Name (Last, First, Middle Initial) Mr. John E. Graydon		Date of Receipt
	Mailing Address 93 Matlack Drive		12 19 2008
	City Voorhees	State Zip Code NJ 08043-4723	Transaction ID: 16178343
	FEC ID number of contributing federal political committee.	NJ 08043-4723	Amount of Each Receipt this Period 500.00
	Name of Employer Virtua Health	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	00
	SUBTOTAL of Receipts This Page (optional)		940.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
. ∠ 	Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane	State 7in Code	Date of Receipt 1 2 1 9 2 0 0 8
	City Livingston	State Zip Code NJ 07039-2750	Transaction ID: 16178345 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Vice President Continuing Care Service Aggregate Year-to-Date ▼ 240.00	ce
3.	Full Name (Last, First, Middle Initial) Ms. Linda A Savino Mailing Address 13 Telegraph Hill		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 16178347
	<u>Holmdel</u>	NJ 07733-1465	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Rehabilitation Hospital of Tinton Fall	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Ms Susan Bichel		Date of Receipt
	Mailing Address 701 Grove Road		1 2 1 8 2 0 0 8
	City	State Zip Code	Transaction ID: 16179031
	Greenville	SC 29605-4211	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Greenville Hospital System	Occupation Vice President Financial Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		760.00

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial p	oied from such Reports and Staturposes, other than using the national management (In Full) Spital Association PAC	tements may not be sold or used by any person ame and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	of contributing committee.	State Zip Code SC 29607-3747 C Occupation VP of Legal Affairs Aggregate Year-to-Date 500.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last Mr. Douglas Bow	, First, Middle Initial) ling 2509 Watercrest Lane of contributing committee.	State Zip Code SC 29455-3108 C Occupation Vice President of System Development	Date of Receipt 1 2
Receipt For: Primary Other (specific parts) Full Name (Last Hughlyn Burgess Mailing Address	, First, Middle Initial)	Aggregate Year-to-Date ▼ 500.00	Date of Receipt
City Anderson FEC ID number federal political of Employ AnMed Health Receipt For: Primary Other (spe	of contributing committee.	State Zip Code SC 29621-3565 C Occupation Trustee Aggregate Year-to-Date ▼ 500.00	Transaction ID: 16179034 Amount of Each Receipt this Period 250.00
SUBTOTAL of Re	ceipts This Page (optional)	<u></u>	750.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Allen P Carroll		Date of Receipt
Mailing Address 2095 Henry Tecklenb		12 18 2008
City Charleston	State Zip Code SC 29414-5733	Transaction ID: 16179035 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Howell Clyborne		Date of Receipt
Mailing Address 701 Grove Road		12 18 2008
City	State Zip Code SC 29605-4211	Transaction ID: 16179042
Greenville FEC ID number of contributing federal political committee.	SC 29605-4211	Amount of Each Receipt this Period 250.00
Name of Employer Greenville Hospital System	Occupation Vice President Community and Gov	ernmen
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jay Cox		Date of Receipt
Mailing Address 129 North Washington	n Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179043
Sumter FEC ID number of contributing federal political committee.	SC 29150-4983	Amount of Each Receipt this Period 550.00
Name of Employer Tuomey Healthcare System	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may no e name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Wallace J Davies			Date of Receipt
	Mailing Address 800 North Fant Street		7: 0: 1:	12 / 18 / 2008
	City Anderson	State SC	Zip Code 29621-5708	Transaction ID: 16179044 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer AnMed Health	Occupation Medical Dir	ector/Emergency Services	s
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Dr Gene Dickerson, , M.D. Mailing Address 129 North Washingtor	Street		Date of Receipt
				12 18 2008
	City Sumter	State SC	Zip Code 29150-4983	Transaction ID: 16179045 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	250.00
	Name of Employer Tuomey Healthcare System	Occupation Vice Presid	ent of Medical Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	
—).	Full Name (Last, First, Middle Initial) Mr. Douglas Dorman	I		Date of Receipt
	Mailing Address 701 Grove Road			1 2 1 8 2 0 0 8
	City	State	Zip Code	Transaction ID: 16179046
	Greenville FEC ID number of contributing federal political committee.	SC	29605-5611	Amount of Each Receipt this Period 250.00
	Name of Employer Greenville Hospital System	Occupation VP Human	Resources & Operations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	
5	SUBTOTAL of Receipts This Page (optional)	1		1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to s	of for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. J Larry Dozier, , Jr., FAC Mailing Address P O Box 620		Date of Receipt
City	State Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179048
Winnsboro	SC 29180-0620	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Palmetto Health	Occupation Chief Executive Officer]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Doran Dunaway		Date of Receipt
Mailing Address 701 Grove Road		12 18 2008
City	State Zip Code	Transaction ID: 16179049
Greenville	SC 29605-4211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Greenville Hospital System	Occupation Vice President Information and Techno	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David L. Dunlap, FACHE		Date of Receipt
Mailing Address 125 Doughty Street Suite 760		12 18 2008
City	State Zip Code	Transaction ID: 16179050
Charleston FEC ID number of contributing federal political committee.	SC 29403-5736	Amount of Each Receipt this Period 500.00
Name of Employer Roper Hospital	Occupation President and Chief Executive Officer	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	l)	1000.00
TOTAL This Period (last page this line number	per only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG			
Full Name (Last, First, Middle Initial) Rev Terence K Fleming			Date of Receipt
Mailing Address PO Box 357			12 18 2008
City	State	Zip Code	Transaction ID: 16179054
Folly Beach FEC ID number of contributing federal political committee.	SC	29439-0357	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupatio VP for M		7
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Lisa M Goodlett			Date of Receipt
Mailing Address 3000 St Matthews F	Road		12 18 YYYY 12008
City <u>Orangeburg</u>	State SC	Zip Code 29118-1442	Transaction ID: 16179055
FEC ID number of contributing federal political committee.	C	29110-1442	Amount of Each Receipt this Period 500.00
Name of Employer Regional Medical Center of Orangeburg	Occupatio Vice Pres	n sident Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Doug Harrison			Date of Receipt
Mailing Address 1574 Fiddlers Mars	h Drive		12 18 2008
City Mt Pleasant	State SC	Zip Code	Transaction ID: 16179056
Mt Pleasant FEC ID number of contributing federal political committee.	C	29464-4286	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupatio Vice Pres	n sident, Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)		1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 231 (check only one) X 11a
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAGE	nd Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Lisa Irvin		Date of Receipt
Mailing Address 159 Harbour Watch	State Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179057
Mount Pleasant	SC 29464-2827	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation VP of Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Malcolm W Isley Mailing Address 109 Anna's Place		Date of Receipt
Walling Address 109 Allila ST lace	12 18 2008	
City	State Zip Code	Transaction ID: 16179058
Simpsonville	SC 29681-4813	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Greenville Hospital System	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Ellen Jackson	<u>'</u>	Date of Receipt
Mailing Address 316 Calhoun Street	l e e e e e e e e e e e e e e e e e e e	12 18 2008
City	State Zip Code	Transaction ID: 16179063
Charleston	SC 29401-1113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation VP, Managed Care & Physician Ser	vices
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUPPORAL of Pagaints This Paga (antions	ıl)	750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr Bret Johnson Mailing Address 316 Calhoun Street	State 7 in Code	Date of Receipt 1 2 1 8 2 0 0 8
	City Charleston	State Zip Code SC 29401-1113	Transaction ID: 16179064 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 23401-1113	250.00
	Name of Employer Roper Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date ▼ 500.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr. Edmond R. Jordan Mailing Address 201 Graylyn Drive		Date of Receipt
	City	State Zip Code	Transaction ID: 16179065
	Anderson	SC 29621-1985	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer AnMed Health Medical Cent- er	Occupation Director of Urgent Care	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Mr Fred L Latham		Date of Receipt
	Mailing Address 1325 Spring Street		1 2 1 8 2 0 0 8
	City	State Zip Code	Transaction ID: 16179066
	Greenwood	SC 29646-3860	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Self Regional Healthcare	Occupation Executive Vice President and Chief O	pe
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	.	1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the led Summary Page	FOR LINE NUMBER: PAGE 117 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be s name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Mr. John A Miller, , Jr., FAC			Date of Receipt
	Mailing Address 1205 Briarwood Ave.			12 18 2008
	City Anderson	<u> </u>	Code 621-3931	Transaction ID: 16179067 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer AnMed Health Medical Cent- er	Occupation President		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-	Date ▼ 1500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Michael C. Riordan Mailing Address 4 White Crescent Lane			Date of Receipt
				12 18 2008
	City Simpsonville		Code 681-3614	Transaction ID: 16179069 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Greenville Hospital System	Occupation President and C	EO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 1000.00]
_ С.	Full Name (Last, First, Middle Initial) Ms. Jeanne L Ward			Date of Receipt
	Mailing Address 298 Memorial Drive			1 2 1 8 2 0 0 8
	City		Code	Transaction ID: 16179070
	Seneca FEC ID number of contributing federal political committee.	SC 296	572-9499	Amount of Each Receipt this Period 500.00
	Name of Employer Oconee Memorial Hospital	Occupation President and C	hief Executive Office	 r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-		
	SUBTOTAL of Receipts This Page (optional)			1750.00
r	TOTAL This Period (last page this line number		·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Charles D Beaman, , Jr. Mailing Address P O Box 2266 City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
	Columbia	SC 29202-2266	Transaction ID: 16179071 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 25202 2200	500.00
	Name of Employer Palmetto Health Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Philip A Clayton Mailing Address PO Box 829		Date of Receipt 1 2 1 8 2 0 0 8
	City	State Zip Code	Transaction ID: 16179072
	Conway	SC 29528	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Conway Medical Center	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Richard E D'Alberto, , FACHE		Date of Receipt
	Mailing Address P O Box 976		12 18 2008
	City	State Zip Code	Transaction ID: 16179073
	Clinton	SC 29325-0976	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Laurens County Healthcare System	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
5	SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 231 (check only one) X	
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Mr. Thomas C Dandridge Mailing Address 3000 St Matthews	Road		Date of Receipt	
City Orangeburg	State SC	Zip Code 29118-1442	Transaction ID: 16179074 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	Occupation		1000.00	
Name of Employer Regional Medical Center of Orangeburg Receipt For: Primary General Other (specify) ▼	Presiden			
Full Name (Last, First, Middle Initial) Dr. Richard Foster, MD Mailing Address 1000 Center Point	Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State	Zip Code	Transaction ID: 16179075	
Columbia	<u>Columbia</u> <u>SC 29210-5802</u>			
FEC ID number of contributing federal political committee.	C		365.37	
Name of Employer South Carolina Hospital Association Receipt For:		President		
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.37		
Full Name (Last, First, Middle Initial) Mr. W. Ham Hudson	'		Date of Receipt	
Mailing Address 298 Memorial Drive	е		12 18 2008	
City	State	Zip Code	Transaction ID: 16179076	
Seneca FEC ID number of contributing federal political committee.	SC	29672-9499	Amount of Each Receipt this Period 500.00	
Name of Employer Laurens County Healthcare System	Occupation CEO	_		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (options	al)	\	1865.37	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. J. Thornton Kirby Mailing Address 1000 Center Point	Road	Date of Receipt 1 2 1 8 2 0 0 8
City Columbia	State Zip Code SC 29210-5802	Transaction ID: 16179077 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	730.74
Name of Employer South Carolina Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date ▼ 730.74	
Full Name (Last, First, Middle Initial) Ms. Valinda Rutledge Mailing Address One St Francis Dri	ve	Date of Receipt
City	State Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179078
Greenville FEC ID number of contributing federal political committee.	SC 29601-3207	Amount of Each Receipt this Period 500.00
Name of Employer Bon Secours St. Francis Health System Receipt For: Primary General	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	-
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Mr. Stuart Smith		Date of Receipt
Mailing Address 169 Ashley Avenue	9	12 18 2008
City	State Zip Code	Transaction ID: 16179079
Charleston FEC ID number of contributing federal political committee.	SC 29425-8905	Amount of Each Receipt this Period 1000.00
Name of Employer MUSC Medical Center of Me- dical Univers	Occupation Vice President Clinical Operations and	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
	1	2230.74

Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Patti Smoake Mailing Address 1000 Center Point Road City Columbia FEC ID number of contributing federal political committee. Name of Employer South Carolina Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Allan Stalvey	State Zip Code SC 29210-5802 C Occupation VP, Public Relations Aggregate Year-to-Date 365.37	Date of Receipt Date of Receipt
Ms. Patti Smoake Mailing Address 1000 Center Point Road City Columbia FEC ID number of contributing federal political committee. Name of Employer South Carolina Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	SC 29210-5802 C Occupation VP, Public Relations Aggregate Year-to-Date ▼	1 2 1 8 2 0 0 8 Transaction ID: 16179080 Amount of Each Receipt this Period
Columbia FEC ID number of contributing federal political committee. Name of Employer South Carolina Hospital Association Receipt For: □ Primary □ General □ Other (specify) ▼ Full Name (Last, First, Middle Initial)	SC 29210-5802 C Occupation VP, Public Relations Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer South Carolina Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation VP, Public Relations Aggregate Year-to-Date ▼	
federal political committee. Name of Employer South Carolina Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Occupation VP, Public Relations Aggregate Year-to-Date ▼	365.37
Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	VP, Public Relations Aggregate Year-to-Date ▼	
Mailing Address 900 Gregg Street		Date of Receipt
City	State Zip Code	12 18 2008
Columbia	SC 29201-3913	Transaction ID: 16179081 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	950.00
Name of Employer South Carolina Hospital Association	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Mr. Doug White		Date of Receipt
Mailing Address 809 82nd Parkway		12 18 2008
City	State Zip Code	Transaction ID: 16179082
Myrtle Beach	SC 29572-4611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1010.00
Name of Employer Grand Strand Regional Med- ical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1010.00	
SUBTOTAL of Receipts This Page (optional)		2325.37

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 231 (check only one) X
or 1	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
۱.	Full Name (Last, First, Middle Initial) Mr. John E. Callender Mailing Address 2743 Elginfield Road City	State	Zip Code	Date of Receipt 1 2 1 8 2 0 0 8 Transaction ID: 16179093
	Upper Arlington FEC ID number of contributing federal political committee.	OH	43220-4247	Amount of Each Receipt this Period 50.00
	Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify)		n ice President e Year-to-Date ▼ 450.00	
3.	Full Name (Last, First, Middle Initial) Mr. David Perse Mailing Address 1730 West 25th Street			Date of Receipt 1 2 1 8 2 0 0 8
	City Cleveland FEC ID number of contributing federal political committee.	State OH	Zip Code 44113-3108	Transaction ID: 16179135 Amount of Each Receipt this Period 250.00
	Name of Employer Lutheran Hospital	Occupation Presiden		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Janice Murphy Mailing Address 25365 Plainview Court			Date of Receipt 1 2 1 8 2 0 0 8
	City	State	Zip Code	Transaction ID: 16179141
	Columbia Station FEC ID number of contributing federal political committee.	OH C	44028-8914	Amount of Each Receipt this Period 250.00
	Name of Employer Fairview Hospital	Occupation Vice Pres	n sident, Nursing	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SI	JBTOTAL of Receipts This Page (optional)	l		550.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association Page 1	and Statements may not be sold or used by any person ng the name and address of any political committee to a	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Fred M DeGrandis Mailing Address 18101 Lorain Ave City Cleveland	State Zip Code OH 44111-5612	Date of Receipt 1 2 1 8 2 0 0 8 Transaction ID: 16179155 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Fairview Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Ms Patricia G Ball Mailing Address 2800 North Dallas Suite 200	s Parkway	Date of Receipt
City Plano FEC ID number of contributing federal political committee.	State Zip Code TX 75093-5993	Transaction ID: 16179162 Amount of Each Receipt this Period 1000.00
Name of Employer Legacy Hospital Partners, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation SVP of Strategic Dev & Public Affairs Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Michael J. Rock		Date of Receipt
Mailing Address 325 Seventh Stre Suite 700 City	State Zip Code	12 18 2008 Transaction ID: 16179163
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 350.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)	1600.00

П	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A O	r for commercial purposes, other than using the	natements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. Thomas P. Nickels		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		12 18 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: 16179164 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)	Occupation Sr. Vice President, Federal Relations Aggregate Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Ms Vanessa Purnell		Date of Receipt
	Mailing Address 1447 York Road		12 19 2008
	City	State Zip Code	Transaction ID: 16179241
	Lutherville FEC ID number of contributing federal political committee.	MD 21093-6014	Amount of Each Receipt this Period 500.00
	Name of Employer MedStar Health	Occupation Assistant Vice President Government	- Af
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Steven S. Cohen		Date of Receipt
	Mailing Address 5565 Sterrett Place 5th Floor		12 19 2008
	City Columbia	State Zip Code MD 21044-2665	Transaction ID: 16179243 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer MedStar Health	Occupation Sr. VP, Intergrated Operations	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		2000.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 231 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∡.	Full Name (Last, First, Middle Initial) Matthew Anderson Mailing Address 2550 University Ave. V	*	Date of Receipt 1 2 1 9 2 0 0 8
	City Saint Paul	State Zip Code MN 55114-1907	Transaction ID: 16179507 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	144.84
	Name of Employer Minnesota Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP of Regulatory&Strategic Aggregate Year-to-Date ▼ 212.18]
- s.	Full Name (Last, First, Middle Initial) Ms. Ann Gibson Mailing Address 2550 University Avenu	e W.	Date of Receipt
	Suite 350-S		12 19 2008
	City Saint Paul	State Zip Code MN 55114-1052	Transaction ID: 16179511 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 33114 1032	60.00
	Name of Employer Minnesota Hospital Associ- ation	Occupation Director, Health Policy & Federal Rel	a
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
_	Full Name (Last, First, Middle Initial) Ms. Amy Harris		Date of Receipt
	Mailing Address 631 SE First Street		12 19 YYYY 12 19 2008
	City	State Zip Code	Transaction ID: 16179514
	<u>Faribault</u>	MN 55021-6362	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer Fairview Health Services	Occupation Director of Public Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
	SUBTOTAL of Receipts This Page (optional)	······	234.84

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to n PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initia Mr. Richard Kreyer Mailing Address 2550 Universi	ty Avenue W.	Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Saint Paul FEC ID number of contributing	State Zip Code MN 55114-1052	Transaction ID: 16179518 Amount of Each Receipt this Period 98.00
Name of Employer Minnesota Hospital Association Receipt For: Primary General Other (specify)	Occupation Vice President, Labor Relations Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initia Mr. Mark Sonneborn Mailing Address 2550 Universi		Date of Receipt
City	State Zip Code	Transaction ID: 16179523
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice President of Information Service	s
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initia Ms. Peggy Westby Mailing Address 2550 Universi Suite 350-S	,	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179524
Saint Paul FEC ID number of contributing federal political committee.	MN 55114-1052	Amount of Each Receipt this Period 65.22
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.01	
SUBTOTAL of Receipts This Page (optional)	223.22

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor ne name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Joseph L Woodin		Date of Receipt
Mailing Address P O Box 10 264 Maple Ridge Lar	ie	12 22 2008
City	State Zip Code VT 05065-0010	Transaction ID: 16186237
Sharon FEC ID number of contributing federal political committee.	VT 05065-0010	Amount of Each Receipt this Period 350.00
Name of Employer Gifford Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Beth Berry		Date of Receipt
Mailing Address 500 Interstate Boulev	rard South	12 22 2008
City	State Zip Code	Transaction ID: 16189080
Nashville	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Sr. Vice President, Government Affairs	s
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Chris Clarke		Date of Receipt
Mailing Address 500 Interestate Blvd.	South	12 22 2008
City	State Zip Code	Transaction ID: 16189081
Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 150.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Senior Vice President, Center for Pati	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		750.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	·	73.35

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael A. Dietrich		Date of Receipt
Mailing Address 500 Interstate Boulev		12 22 2008
City	State Zip Code	Transaction ID: 16189082
Nashville	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Assistant Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. James L. Goodloe		Date of Receipt
Mailing Address 500 Interstate Blvd. S	outh	12 / 22 / 2008
City	State Zip Code	Transaction ID: 16189083
<u>Nashville</u>	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Senior Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. Michael Huggins		Date of Receipt
Mailing Address 500 Interstate Boulev	ard South	12 22 2008
City	State Zip Code	Transaction ID: 16189084
Nashville	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Executive Vice President & COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		650.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 231 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Bill Jolley			Date of Receipt
Mailing Address 500 Interstate Blvd	-		12 22 2008
City Nashville	State TN	Zip Code 37210-4634	Transaction ID: 16189085 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Tennessee Hospital Associ- ation	Occupation Assistant	n t Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. William H Anderson Mailing Address P O Box 610			Date of Receipt
City	State	Zip Code	1 2 2 2 2 0 0 8 Transaction ID: 16189087
Sheffield	AL	35660-0610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Helen Keller Hospital	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Ronald S Owen			Date of Receipt
Mailing Address P O Box 6987			12 22 7 2008
City Dothan	State AL	Zip Code	Transaction ID: 16189092
FEC ID number of contributing federal political committee.	C	36302-6987	Amount of Each Receipt this Period 400.00
Name of Employer Southeast Alabama Medical Center		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (option	al)		1550.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 231 (check only one) X
or 1	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
۱.	Full Name (Last, First, Middle Initial) Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City	State	Zip Code	Date of Receipt M
	Topeka FEC ID number of contributing federal political committee.	KS	66614-4305	Amount of Each Receipt this Period 34.50
	Name of Employer Kansas Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n sident, Government Relation Year-to-Date ▼ 324.50	IS S
3.	Full Name (Last, First, Middle Initial) Mr. Fred J. Lucky Mailing Address 14607 W 89			Date of Receipt
	City Lenexa FEC ID number of contributing federal political committee.	State KS	Zip Code 66215-2967	Transaction ID: 16189106 Amount of Each Receipt this Period 115.40
	Name of Employer Kansas Hospital Association Receipt For: Primary Other (specify)		n ice President e Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) Ms. Melissa Levy Hungerford Mailing Address 6448 SW Bayshore Dr	0 0	0 0 0 0 0 0 0	Date of Receipt
	City Auburn FEC ID number of contributing	State KS	Zip Code 66402-9324	1 2 2 2 2 0 0 8 Transaction ID: 16189108 Amount of Each Receipt this Period 57.70
	federal political committee. Name of Employer Kansas Hospital Association	Occupation Sr. Vice	President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.03	
SI	JBTOTAL of Receipts This Page (optional)			207.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert T. Meling		Date of Receipt
Mailing Address 13005 Catalina Street	State 7in Code	12 22 2008
City Leawood	State Zip Code KS 66209-2392	Transaction ID: 16189109 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	57.69
Name of Employer Associated Purchasing Ser- vices	Occupation Senior Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas L. Bell		Date of Receipt
Mailing Address 4301 NW Valley Road		12 22 2008
City	State Zip Code	Transaction ID: 16189113
<u>Topeka</u>	KS 66618-3445	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	557.70
Name of Employer Kansas Hospital Associati- on	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. William M Murray		Date of Receipt
Mailing Address 9801 Renner Boulevard	d, Ste 100	12
City	State Zip Code	Transaction ID: 16189114
<u>Lenexa</u>	KS 66219-9745	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Sisters of Charity of Lea- venworth Heal	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
SUBTOTAL of Receipts This Page (optional)		990.39
TOTAL This Period (last page this line number of	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 231 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steven B. Poage Mailing Address 3401 SW Alameda City Topeka FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For:	State Zip Code KS 66614-5109 C Occupation Vice President/CFO Aggregate Year-to-Date	Date of Receipt 1 2 2 2 2 0 0 8 Transaction ID: 16189115 Amount of Each Receipt this Period 250.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	250.00]
Mr. Warren Tardy Mailing Address 310 25th Avenue North Suite 101 City Nashville	h State Zip Code TN 37203-1515	Date of Receipt 1 2 2 3 2 0 0 8 Transaction ID: 16193352 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer HCA	Occupation	300.00
Receipt For: Primary General Other (specify) ▼	Director, Public Policy Management Aggregate Year-to-Date ▼ 300.00	Grb
Full Name (Last, First, Middle Initial) Mr. James C Cooper Mailing Address P O Box 5525		Date of Receipt
City Bismarck	State Zip Code ND 58506-5525	Transaction ID: 16196000 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MedCenter One	Occupation President and Chief Executive Office	er
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		800.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 231 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Kathy A. Bizarro, FACHE Mailing Address 544 Upper Straw Rd City Hopkinton FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General	State Zip Code NH 03229-2023 C Occupation Executive Vice President Aggregate Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Anne Jamieson Mailing Address One Parkland Drive City Derry FEC ID number of contributing	State Zip Code NH 03038-2746	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 350.00	350.00
Full Name (Last, First, Middle Initial) Ms. Nancy R. Willis Mailing Address 900 East Broadway City	State Zip Code	Date of Receipt M
Bismarck FEC ID number of contributing federal political committee.	ND 58501-4520	Amount of Each Receipt this Period 250.00
Name of Employer St. Alexius Medical Center Receipt For: Primary General Other (specify) ▼	Occupation VP of Government Relations & Market Aggregate Year-to-Date 250.00	eting
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persor e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Barry G Beeman Mailing Address 17 Belmont Avenue City Brattleboro FEC ID number of contributing federal political committee. Name of Employer Brattleboro Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code VT 05301-6613 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Penny Brooke Mailing Address 36 South State Street City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Intermountain Healthcare, Inc. Receipt For: Primary General Other (specify)		Date of Receipt 1 2 29 2008 Transaction ID: 16196124 Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Dr. Charles W Sorenson, , Jr., M.D Mailing Address 36 South State Street City Salt Lake City FEC ID number of contributing federal political committee. Name of Employer Intermountain Healthcare, Inc. Receipt For:		Date of Receipt M M J 29 / 2008 Transaction ID: 16196126 Amount of Each Receipt this Period 500.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	500.00	1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 231 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S	Statements may	v not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	e name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)			
Mr. John F. Nicholls Mailing Address 70 Delmont Avenue			Date of Receipt 1 2 3 0 2 0 0 8
City	State	Zip Code	Transaction ID: 16197618
Barre	VT	05641-3214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00041 0214	350.00
Name of Employer Central Vermont Medical Center	Occupatio Trustee	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		350.00]
Full Name (Last, First, Middle Initial) Hollie Phillips			Date of Receipt
Mailing Address 237 Kingsway Dr			12 23 2008
City	State	Zip Code	Transaction ID: 16198475
Lexington	KY	40502-1642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		600.00
Name of Employer Appalachian Regional Heal- thcare	Occupatio VP Corpo	n orate Startegy	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Mr. Melvyn Patashnick			Date of Receipt
Mailing Address 528 Washington High	way		12 22 2008
City	State	Zip Code	Transaction ID: 16198483
Morrisville	VT	05661-8973	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Copley Hospital	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	1
SUBTOTAL of Receipts This Page (optional)			1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Anthony Caprio Mailing Address 6 Cottage Lane City	State Zip Code	Date of Receipt 1 2 2 2 2 0 0 8 Transaction ID: 16198486
Marlboro FEC ID number of contributing federal political committee.	NJ 07746-2123	Amount of Each Receipt this Period 350.00
Name of Employer CentraState Healthcare System Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chairman Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Bill M. Welch Mailing Address 3352 Corey Drive		Date of Receipt 1 2 2 3 2 0 0 8
City Reno	State Zip Code NV 89509-3931	Transaction ID: 16198487 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Nevada Hospital Association Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	500.00
Full Name (Last, First, Middle Initial) Mr. Jack Ludmir Mailing Address 800 Spruce Street		Date of Receipt 1 2 2 9 2 0 0 8
City Philadelphia FEC ID number of contributing	State Zip Code PA 19107-6130 C	Transaction ID: 16198488 Amount of Each Receipt this Period 350.00
federal political committee. Name of Employer Pennsylvania Hospital	Occupation Chair, Obstetrics & Gynecology	330.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	l)	1200.00

SCHEDULE A	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 231 (check only one) X
Any information copi or for commercial pu NAME OF COMI	rposes, other than using the r	atements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	pital Association PAC			
Ms. Eva C. LaBaro	First, Middle Initial) ge 6434 Sun Flag Ct.			Date of Receipt
City	——————————————————————————————————————	State	Zip Code	1 2 2 9 2 0 0 8 Transaction ID: 16198489
<u>Sparks</u>		NV	89436-5400	Amount of Each Receipt this Period
FEC ID number of federal political control		C		500.00
Name of Employe Nevada Hospital on	er Associati-	Occupation Director of	n of Operations	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 500.00	
Alice Ensogna	First, Middle Initial)			Date of Receipt
Mailing Address	1909 Wayland Dr			12 30 2008
City		State	Zip Code	Transaction ID: 16208229
Winchester FEC ID number of federal political controls.		C	22601-6217	Amount of Each Receipt this Period 350.00
Name of Employe Valley Health Sys	er stem	Occupation Chief Nur	n rsing Officer	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, Mr. Thomas C. Jiv	First, Middle Initial) iden			Date of Receipt
Mailing Address	2713 Greenhill Avenue			1 2 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 16208232
Lynchburg FEC ID number of federal political controls.		C	24503-2923	Amount of Each Receipt this Period 350.00
Name of Employe Centra Health	er	Occupation Senior Vi	n ce President	
Receipt For: Primary Other (spec	General	-	Year-to-Date ▼ 350.00	
SUBTOTAL of Rec	eipts This Page (optional)			1200.00
TOTAL This Period	d (last page this line number o	nlv)		

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 231 (check only one) X 11a 11b 11c 12
or for	information copied from such Reports and S r commercial purposes, other than using the AME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A	merican Hospital Association PAC			
M. <u>M</u>	ull Name (Last, First, Middle Initial) Ir Xavier Richardson Iailing Address 8121 Lee Jackson Circ	cle		Date of Receipt
	ity Spotsylvania	State VA	Zip Code 22553-3819	Transaction ID: 16208256 Amount of Each Receipt this Period
	EC ID number of contributing sideral political committee.	C		350.00
M	ame of Employer ledicorp Health System	1 '	sident Corporate Developmen	nt
H [eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
. <u>M</u>	ull Name (Last, First, Middle Initial) Ir. George W Dawson lailing Address 1920 Atherholt Road	'		Date of Receipt
	lailing Address 1920 Athernoit Hoad			12 30 2008
	ity	State	Zip Code	Transaction ID: 16208264
FI	ynchburg EC ID number of contributing deral political committee.	C	24501-1104	Amount of Each Receipt this Period 350.00
_	ame of Employer entra Health	Occupatio Presiden	n t and Chief Executive Officer	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
. <u>M</u>	ull Name (Last, First, Middle Initial) Ir. Hank J Porten, , CHE lailing Address 575 Beech Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	ity	State	Zip Code	Transaction ID: 16211595
FI	lolyoke EC ID number of contributing sederal political committee.	C	01040-2223	Amount of Each Receipt this Period 350.00
N H	ame of Employer olyoke Medical Center	Occupatio Presiden	n t and Chief Executive Officer	
R [eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
SUE	BTOTAL of Receipts This Page (optional)			1050.00
тот	FAL This Period (last page this line number	only)	>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Mr. Jon Fishpaw Mailing Address 615 Elsinore Place City	State 7in Code	Date of Receipt 1 2 2 9 2 0 0 8
Cincinnati FEC ID number of contributing federal political committee.	State Zip Code OH 45202-1459 C	Transaction ID: 16211601 Amount of Each Receipt this Period 250.00
Name of Employer Catholic Healthcare Partners Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Corp. Director, Advocacy & Gov't. Rel Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. John E. Callender Mailing Address 2743 Elginfield Road	d	Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16211612
Upper Arlington	OH 43220-4247	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Ohio Hospital Association	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Michael K Winthrop Mailing Address P O Box 8004		Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16211614
Bellevue FEC ID number of contributing federal political committee.	OH 44811-8004	Amount of Each Receipt this Period 250.00
Name of Employer Bellevue Hospital	Occupation President	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·	1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Keiser Mailing Address 2237 Bryden Road City Bexley FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For:	State Zip Code OH 43209-1612 C Occupation Chief Information Officer	Date of Receipt 1 2
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 500.00	
Ms. Bridget A. Gargan Mailing Address 54 West Weisheimer	Road	Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16211617
Columbus FEC ID number of contributing federal political committee. Name of Employer	OH 43214-2545 C Occupation	Amount of Each Receipt this Period 500.00
Ohio Hospital Association Receipt For: Primary General Other (specify)	Vice President, State Policy & Advoc Aggregate Year-to-Date ▼ 1000.00	ac
Full Name (Last, First, Middle Initial) Ms. Mary M. Yost		Date of Receipt
Mailing Address 924 Riva Ridge Bould		12 30 7 2008
City <u>Ga</u> hanna	State Zip Code OH 43230-3825	Transaction ID: 16211618
FEC ID number of contributing federal political committee.	C 43230-3625	Amount of Each Receipt this Period 250.00
Name of Employer Ohio Hospital Association	Occupation Vice President, Public Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SCHEDULE A	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copi or for commercial pu	rposes, other than using the	atements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	pital Association PAC			
Mr. R. Reed Frale	First, Middle Initial) / 257 Clouse Lane			Date of Receipt
City	257 Clouse Larie	State	Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16211619
<u>Granville</u>		OH	43023-1428	Amount of Each Receipt this Period
FEC ID number of federal political co		С		250.00
Name of Employe Ohio Hospital As	er sociation	Occupation Senior Vi	n ce President	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 500.00	
Mr. James R. Cas				Date of Receipt
	815 Gatehouse Lane			12 / 30 / Y Y Y Y Y
City		State	Zip Code	Transaction ID: 16211620
Columbus FEC ID number of federal political co		C	43235-1733	Amount of Each Receipt this Period 500.00
Name of Employe Ohio Hospital As	er sociation	Occupation President	n t & Chief Executive Officer	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, Steven Allen	First, Middle Initial)			Date of Receipt
Mailing Address	4040 Baughman Grant			12 30 7 2008
City		State	Zip Code	Transaction ID: 16211621
New Albany FEC ID number of federal political co		ОН	43054-8933	Amount of Each Receipt this Period 125.00
Name of Employe Nationwide Child pital	er ren's Hos-	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Rec	ciata Thia Dana (antiana)			875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persor e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Ronald J Bachman		Date of Receipt
Mailing Address 1000 McKinley Park D		12 30 2008
City Marion	State Zip Code OH 43302-6397	Transaction ID: 16211622 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Marion General Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Lyndon J Christman		Date of Receipt
Mailing Address 203 Bryn Drive		12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16211623
Granville	OH 43023-1503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	337.50
Name of Employer Fayette County Memorial Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) Dr. John D. Clough, MD		Date of Receipt
Mailing Address 1760 Carriage Place		12
City	State Zip Code	Transaction ID: 16211624
Gates Mills	OH 44040-9755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Cleveland Clinic Health System	Occupation Director of Health Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1087.50
TOTAL This Period (last page this line number	<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. William W. W Harding			Date of Receipt
	Mailing Address 1305 Independence Ci	rcle S.E.		12 30 7 2008
	City New Philadelphia	State OH	Zip Code	Transaction ID: 16211625
	FEC ID number of contributing federal political committee.	C	44663	Amount of Each Receipt this Period 250.00
	Name of Employer Union Hospital	Occupatio Presiden	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Stanley R Korducki			Date of Receipt
	Mailing Address 950 West Wooster Str	eet		12 30 2008
	City	State	Zip Code	Transaction ID: 16211626
	Bowling Green FEC ID number of contributing federal political committee.	ОН	43402-2603	Amount of Each Receipt this Period 500.00
	Name of Employer Wood County Hospital	Occupatio Presiden		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Kevin C Martin	1		Date of Receipt
	Mailing Address 630 East River Street			12 30 Y Y Y Y Y Y Y
	City Elyria	State OH	Zip Code	Transaction ID: 16211627
	FEC ID number of contributing federal political committee.	C	44035-5902	Amount of Each Receipt this Period 500.00
	Name of Employer EMH Regional Medical Cent- er	Occupatio Presiden	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)	1		1250.00
上	TOTAL This Period (last page this line number		<u> </u>	

	LE A (FEC Form 3X) • RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 231 (check only one) X 11a
or for commerc	n copied from such Reports and St cial purposes, other than using the COMMITTEE (In Full) Hospital Association PAC	atements ma name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Patrick J	(Last, First, Middle Initial) J Martin dress 272 Benedict Avenue			Date of Receipt 1 2 3 0 4 2 0 0 8
City <u>Norwa</u> lk		State OH	Zip Code 44857-2374	Transaction ID: 16211628
FEC ID nur	mber of contributing ical committee.	С	44657-2374	Amount of Each Receipt this Period 125.00
er Receipt For Prima			n t and Chief Executive Office e Year-to-Date ▼ 250.00	er .
Full Name (Mr. John S F Mailing Add		ad		Date of Receipt 1 2 3 0 2 0 0 8
City		State	Zip Code	Transaction ID: 16211630
<u>Cincinnat</u>	<u>i</u>	OH	45242-4402	Amount of Each Receipt this Period
	mber of contributing ical committee.	С		175.00
Name of Er Bethesda N	nployer Iorth Hospital	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 350.00	
Mr. Edward	<u>`</u>			Date of Receipt
Mailing Add	dress 2600 Sixth Street SW			12 30 2008
City		State OH	Zip Code	Transaction ID: 16211631
	mber of contributing ical committee.	С	44710-1702	Amount of Each Receipt this Period 250.00
Name of Er Aultman Ho	nployer ospital	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For Prima Other		Aggregate	e Year-to-Date ▼ 500.00	
				550.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 231 (check only one) X
	d Statements may not be sold or used by any person the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC	·	
Full Name (Last, First, Middle Initial) Mr. Robert W Shroder		Date of Receipt
Mailing Address 667 Eastland Avenu	State Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16211632
Warren	OH 44484-4503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Joseph Health Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Charles A Stark, , CHE		Date of Receipt
Mailing Address 1101 Decatur Street		12 30 2008
City	State Zip Code	Transaction ID: 16211633
Sandusky	OH 44870-3335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Firelands Regional Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) Mr. Michael R Stephens		Date of Receipt
Mailing Address 1141 North Monroe	Drive	12 30 YYYYY 12 30 2008
City	State Zip Code	Transaction ID: 16211634
Xenia FEC ID number of contributing federal political committee.	OH 45385-1600	Amount of Each Receipt this Period 200.00
Name of Employer Greene Memorial Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional		1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Mina H Ubbing Mailing Address 750 Fairview Drive City Lancaster FEC ID number of contributing federal political committee. Name of Employer Fairfield Medical Center Receipt For: Primary General Other (specify)	State Zip Code OH 43130-3313 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 600.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Thomas S. Urban Mailing Address 8484 Old Shaw Way City West Chester FEC ID number of contributing federal political committee. Name of Employer Mercy Health Partners Receipt For: Primary General Other (specify)	State Zip Code OH 45069-6400 C Occupation Administrator Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. LaMar L Wyse Mailing Address 975 Tiehack Court W City Galion FEC ID number of contributing federal political committee. Name of Employer Galion Community Hospital Receipt For: Primary General Other (specify)	State Zip Code OH 44833-2312 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	800.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 231 (check only one) X
or for commercial purposes, other than using t	Statements may not be sold or used by any personal Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Mark Armstrong		Date of Receipt
Mailing Address 310 South Limeston		12 29 2008
City Lexington	State Zip Code KY 40508-3008	Transaction ID: 16211667 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer UK HealthCare Good Samaritan Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Frank Beirne Mailing Address 310 South Limestone	e Street	Date of Receipt
City	State Zip Code	1 2 2 9 2 0 0 8 Transaction ID: 16211669
<u>Lexington</u>	KY 40508-3008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Samaritan Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Joseph DeVenuto		Date of Receipt
Mailing Address 4001 Dutchmans La	ne	12 29 YYYYY 12 29 2008
City Louisville	State Zip Code KY 40207-4714	Transaction ID: 16211674
FEC ID number of contributing federal political committee.	C 40207-4714	Amount of Each Receipt this Period 250.00
Name of Employer Norton Suburban Hospital	Occupation Assistant Vice President/CIO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	-	875.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 231 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. David L Gray			Date of Receipt
Mailing Address 913 North Dixie Ave City Elizabethtown	State KY	Zip Code 42701-2599	Transaction ID: 16211686 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	72701 2333	300.00
Name of Employer Hardin Memorial Hospital Receipt For:	Occupation Presiden Aggregate		
Primary General Other (specify) ▼	0 0	800.00	
Full Name (Last, First, Middle Initial) Mr. John D Harryman Mailing Address 4001 Dutchmans La	ane		Date of Receipt 1 2 2 9 2 0 0 8
City	State	Zip Code	Transaction ID: 16211687
Louisville	KY	40207-4799	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Norton Suburban Hospital	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas D Kmetz	1		Date of Receipt
Mailing Address 9820 Third Street R	oad		12 29 2008
City	State KY	Zip Code	Transaction ID: 16211691
Louisville FEC ID number of contributing federal political committee.	C	40272-2802	Amount of Each Receipt this Period 500.00
Name of Employer Norton Southwest Hospital	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)		1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 231 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Kevin S Wardell Mailing Address P O Box 35070			Date of Receipt
City Louisville	State KY	Zip Code 40232-5070	Transaction ID: 16211708 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Norton Hospital	Occupatio		250.00
Receipt For: Primary General Other (specify)	Presiden Aggregate	t e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Tracy E Williams Mailing Address 234 East Gray Street	et, Ste. 225		Date of Receipt 1 2 2 9 2 0 0 8
City	State	Zip Code	Transaction ID: 16211709
Louisville	KY	40202-1913	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Norton Healthcare		ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Douglas A. Winkelhake	•		Date of Receipt
Mailing Address 8911 Duxburry Road	d		12 29 2008
City	State	Zip Code	Transaction ID: 16211710
Louisville FEC ID number of contributing federal political committee.	C	40242-6910	Amount of Each Receipt this Period 250.00
Name of Employer Norton Suburban Hospital	Occupatio Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David Laird Mailing Address 211 Coralberry Ro City Louisville FEC ID number of contributing federal political committee. Name of Employer Norton Healthcare Receipt For: Primary General	State Zip Code KY 40207-5712 C Occupation Chief Administrative Officer Aggregate Year-to-Date 250.00	Date of Receipt M M 29 2008 Transaction ID: 16211715 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Robert J Hudson Mailing Address P O Box 1600 City Richmond FEC ID number of contributing federal political committee. Name of Employer Pattie A. Clay Regional Medical Center Receipt For: Primary General	State Zip Code KY 40476-2603 C Occupation President and Chief Executive Officer Aggregate Year-to-Date	Date of Receipt M M 29 2008 Transaction ID: 16211780 Amount of Each Receipt this Period 324.00
Full Name (Last, First, Middle Initial) Ms. Mary L. Gallagher Mailing Address 155 East Broad Sinst Floor City Columbus FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify)	Treet, State Zip Code OH 43215-3609 C Occupation Vice President & General Counsel Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	nal)	824.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 231 (check only one) X
0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Jeffrey Seraphine		Date of Receipt
	Mailing Address 1140 Lexington Road		12 29 2008
	City Georgetown	State Zip Code KY 40324-9330	Transaction ID: 16212209 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Lake Cumberland Regional Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Jeffrey B Barber, , Dr.PH, F Mailing Address P O Box 20007	. I	Date of Receipt
			12 29 2008
	City Owensboro	State Zip Code KY 42304-0007	Transaction ID: 16212210
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
	Name of Employer Owensboro Medical Health System	Occupation President and Chief Executive Officer	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
. -	Full Name (Last, First, Middle Initial) Mr. Brian Brezosky		Date of Receipt
	Mailing Address Post Office Box 4366	20	12 29 2008
	City	State Zip Code	Transaction ID: 16212251
	Louisville FEC ID number of contributing federal political committee.	KY 40253-6620	Amount of Each Receipt this Period 500.00
	Name of Employer Kentucky Hospital Associa- tion	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Г	CURTOTAL of Posside This Poss (self-sell)		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 231 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Kim J. Dees Mailing Address 2501 Nelson Miller Post Office Box 436			Date of Receipt 1 2 2 9 2 0 0 8
City Louisville FEC ID number of contributing federal political committee.	State KY	Zip Code 40223-2221	Transaction ID: 16212252 Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Associa- tion Receipt For: Primary General Other (specify) ▼		n e Dir, Center for Health Care e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Paige Franklin Mailing Address 404 Kaelin Drive			Date of Receipt 1 2 2 9 2 0 0 8
City Louisville FEC ID number of contributing	State KY	Zip Code 40207-2204	Transaction ID: 16212253 Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n sident, Information Services e Year-to-Date ▼ 500.00	300.00
Full Name (Last, First, Middle Initial) Ms. Nancy C. Galvagni Mailing Address 2501 Nelson Miller	Parkway		Date of Receipt
City Louisville FEC ID number of contributing federal political committee.	State KY	Zip Code 40253	Transaction ID: 16212255 Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		n ice President e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	(b		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 231 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;		
Full Name (Last, First, Middle Initial) Mr. Stephen P. Miller			Date of Receipt
Mailing Address 1101 Cardinal Drive	,		12 29 2008
City	State	Zip Code	Transaction ID: 16212256
Louisville FEC ID number of contributing federal political committee.	C	40253-6629	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Associa- tion	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Sarah S. Nicholson			Date of Receipt
Mailing Address 2501 Nelson Miller I	Parkway		12 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Louisville	State KY	Zip Code 40223-2221	Transaction ID: 16212257
FEC ID number of contributing federal political committee.	C	40225-2221	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Associa- tion	Occupatio Vice Pres	n sident, Government Relation	ns
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Debbie Riley			Date of Receipt
Mailing Address 502 Trotwood Place)		12 29 2008
City Louisville	State KY	Zip Code 40245-4071	Transaction ID: 16212258
FEC ID number of contributing federal political committee.	C	40245-4071	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Associa- tion		ancial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional	<u> </u>		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 231 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Carol J. Walters			Date of Receipt
Mailing Address Post Office Box 436	629		12 29 2008
City	State	Zip Code	Transaction ID: 16212259
Louisville FEC ID number of contributing federal political committee.	C	40253-6629	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Associa- tion	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Charles J. Warnick			Date of Receipt
Mailing Address 120 Hillitop Meadow	I		1 2 2 9 2 0 0 8
City Frankfort	State KY	Zip Code 46001	Transaction ID: 16212260
FEC ID number of contributing federal political committee.	C	40001	Amount of Each Receipt this Period 500.00
Name of Employer Baptist Hospital East	Occupatio Director	n of Planning	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)			
Mr. Patrick Donahue Mailing Address 4604 Highway 60 W	/est		Date of Receipt 1 2 2 9 2 0 0 8
City	State	Zip Code	Transaction ID: 16212261
Morganfield FEC ID number of contributing federal political committee.	C	42437-9570	Amount of Each Receipt this Period 250.00
Name of Employer Methodist Hospital Union County	Occupatio Administ	rator	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
			1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Nemuel O Artiles, , FACHE		Date of Receipt
Mailing Address Post Office Box 859	Ctata Zin Coda	12 31 2008
City Humacao	State Zip Code PR 00792-0859	Transaction ID: 16212481 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hospital Episcopal Cristo Redentor	Occupation Executive Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Jerry Haynes		Date of Receipt
Mailing Address P O Box 8086		12 31 7 9 0 8
City	State Zip Code	Transaction ID: 16212500
Lexington	KY 40533-8086	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Appalachian Regional Heal- thcare	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ms. Evelyn Letnaunchyn		Date of Receipt
Mailing Address 225 Ariel Heights		12 29 2008
City	State Zip Code	Transaction ID: 16212501
Charleston	WV 25311-1143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer n/a	Occupation Homemaker	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional) .		1250.00
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mrs. Lisa Schnedler Mailing Address 304 Franklin		Date of Receipt
City	State Zip Code	1 2 3 1 2 0 0 8 Transaction ID: 16212503
Keosauqua	IA 52565-1164	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Van Buren County Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Larry Chapman		Date of Receipt
Mailing Address 116 Woodgreen Cros		12 30 7 2008
City	State Zip Code	Transaction ID: 16212533
<u>Jackson</u>	MS 39130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.84
Name of Employer Mississippi Hospital Asso- ciation	Occupation VP for Information Systems	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 207.55	
Full Name (Last, First, Middle Initial) Mr. Bob Jones		Date of Receipt
Mailing Address 500 Highway 9 South		12 30 7 2008
City	State Zip Code	Transaction ID: 16212539
<u>Eupora</u>	MS 39744-2215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer North Mississippi Medical Center-Eupor	Occupation Vice President- Materiel Management	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	235.00	
SUBTOTAL of Receipts This Page (optional) .		490.84
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persor g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Richard G Hilton Mailing Address Drawer 1506 City Starkville FEC ID number of contributing federal political committee. Name of Employer Oktibbeha County Hospital Receipt For: Primary General Other (specify)	State Zip Code MS 39760-1506 C Occupation Associate Administrator and Chief Fin Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Larry C. Bourne Mailing Address 424 Autumn Oak E City Madison FEC ID number of contributing federal political committee. Name of Employer HPI Company Receipt For: Primary General	Orive State Zip Code MS 39110-9148 C Occupation President and CEO Aggregate Year-to-Date 262.50	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Judith Forshee Mailing Address Post Office Box 19 City Madison FEC ID number of contributing federal political committee. Name of Employer Mississippi Hospital Association Receipt For: Primary General Other (specify) Other (specify)		Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	390.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 231 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions
·		1
Full Name (Last, First, Middle Initial) Ms. Julie McNeese		Date of Receipt
Mailing Address 116 Woodgreen Cros	sing	12 30 7 2008
City	State Zip Code	Transaction ID: 16212550
Madison	MS 39110-4522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer Mississippi Hospital Asso- ciation	Occupation Vice President, MHA/DSI	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	207.50	
Full Name (Last, First, Middle Initial) Ms. Eileen L Howell	1	Date of Receipt
Mailing Address 23761 Oak Glen Dr.		1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16212572
Southfield	MI 48033-6503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Michigan Orthopaedic Spec- ialty Hospita	Occupation Director, Behavioral Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Mr. Roger J Allman	1	Date of Receipt
Mailing Address 510 Miles Ridge Road	ı	1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16213384
Madison	IN 47250-2420	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	9.00
Name of Employer King's Daughters' Hospital and Health	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 259.00	
CURTOTAL of Descirts This Dags (actional)		324.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Paul Usher Mailing Address 637 Laura Lane City Sweetser FEC ID number of contributing federal political committee. Name of Employer Marion General Hospital Receipt For: Primary General	State Zip Code IN 46987 C Occupation President/CEO Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) Full Name (Last, First, Middle Initial) Mr. David H. Wiesman Mailing Address 4521 Hickory Grove E	250.00 Blvd.	Date of Receipt 1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16213427
Greenwood FEC ID number of contributing federal political committee.	IN 46143-7448	Amount of Each Receipt this Period 125.00
Name of Employer Indiana Hospital Associat- ion Receipt For:	Occupation Hospital Association VP Aggregate Year-to-Date	
Primary General Other (specify) ▼	625.00]
Full Name (Last, First, Middle Initial) Mr. James D. Bickel		Date of Receipt
Mailing Address 4370 Washington Str	eet	12 31 2008
City	State Zip Code	Transaction ID: 16213436
Columbus FEC ID number of contributing federal political committee.	IN 47203-1139	Amount of Each Receipt this Period 250.00
Name of Employer Columbus Regional Hospital	Occupation Director Materials Management	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements mane name and ad	I y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr James Callaghan III, , M.D. Mailing Address 301 West Homer Stree City Michigan City FEC ID number of contributing federal political committee. Name of Employer Saint Anthony Memorial Receipt For: Primary General	State IN C Occupation Vice Pre	sident Medical Affairs e Year-to-Date	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: 16213437 Amount of Each Receipt this Period 300.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Tom J Gryzbek Mailing Address 1335 Capri Lane City Dyer	State IN	Zip Code 46311-1324	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: 16213438 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Saint Margaret Mercy Healthcare Center Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation President Aggregate		375.00
Full Name (Last, First, Middle Initial) Marvin White Mailing Address 6515 Greenridge Driv			Date of Receipt 1 2
City Indianapolis FEC ID number of contributing federal political committee.	State IN	Zip Code 46278-2225	Transaction ID: 16213439 Amount of Each Receipt this Period 500.00
Name of Employer St. Vincent Health Receipt For: Primary General Other (specify) ▼	- '	n nancial Officer e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1175.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Linda Q. Everett		Date of Receipt
Mailing Address 11340 Abbitt Trail City	State Zip Code	1 2
Zionsville	IN 46077-0016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Clarian Health	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Mr. Marvin G Pember		Date of Receipt
Mailing Address 1701 North Senate B	oulvevard	12 31 7 2008
City	State Zip Code	Transaction ID: 16213445
Indianapolis	IN 46202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Clarian Health Partners	Occupation Hospital EVP and CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Ms. Andrea Y Coleman		Date of Receipt
Mailing Address 1227 East Rusholme	Street	12 30 7 2008
City	State Zip Code	Transaction ID: 16213471
Davenport	IA 52803-2498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	900.00
Name of Employer Trinity Medical Center-We- st	Occupation Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (optional)		2400.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 231 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Lena Dobbs-Johnson Mailing Address 3435 West Van Buren City Chicago FEC ID number of contributing federal political committee. Name of Employer Advocate Bethany Hospital Receipt For:	Street State Zip Code IL 60624-3312 C Occupation President Aggregate Year-to-Date	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16213472 Amount of Each Receipt this Period 400.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Robert Green	400.00	Date of Receipt
Mailing Address 774 Forest Avenue City Glen Ellyn	State Zip Code IL 60137-3939	Transaction ID: 16213482 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Advocate Health Care	Occupation Manager	400.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Dean M Harrison Mailing Address 251 East Huron Street		Date of Receipt
City	State Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16213483
Chicago FEC ID number of contributing federal political committee.	C 60611-2908	Amount of Each Receipt this Period 900.00
Name of Employer Northwestern Memorial Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 900.00	er
SUBTOTAL of Receipts This Page (optional)		1700.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 231 (check only one) X 11a
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ <u>/</u> \.	Full Name (Last, First, Middle Initial) Mr. Gary E Kaatz Mailing Address 2400 North Rockton Av	/enue		Date of Receipt
	City Rockford	State IL	Zip Code 61103-3692	Transaction ID: 16213485 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1200.00
	Name of Employer Rockford Memorial Hospital Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Office e Year-to-Date ▼ 1200.00	r
- s.	Full Name (Last, First, Middle Initial) Dr Michael McKenna, , M.D. Mailing Address 3815 Highland Avenue			Date of Receipt 1 2 3 0 2 0 0 8
	City	State	Zip Code	Transaction ID: 16213488
	Downers Grove	IL	60515-1590	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Advocate Good Samaritan Hospital		sident Medical Management	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
. —	Full Name (Last, First, Middle Initial) Mr. Dennis C Millirons, , FACHE			Date of Receipt
	Mailing Address 801 S Milwaukee Aven	ue		12 30 2008
	City	State	Zip Code	Transaction ID: 16213489
	Libertyville FEC ID number of contributing federal political committee.	C	60048-3204	Amount of Each Receipt this Period 1200.00
	Name of Employer Condell Medical Center	Occupation Presiden	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1200.00	
Г				2650.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Mr. David T Ochs		Date of Receipt
Mailing Address 2500 West Reynolds	7.0.1	12 30 7 2008
City Pontiac	State Zip Code IL 61764-2194	Transaction ID: 16213493 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	900.00
Name of Employer OSF Saint James - John W. Albrecht Med	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth L Smithmier		Date of Receipt
Mailing Address 2300 North Edward S	treet	12 30 4 2008
City	State Zip Code	Transaction ID: 16213494
Decatur FEC ID number of contributing federal political committee.	IL 62526-4192	Amount of Each Receipt this Period
Name of Employer Decatur Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) Mr. Keith E Steffen		Date of Receipt
Mailing Address 530 NE Glen Oak Ave	enue	12 30 2008
City	State Zip Code	Transaction ID: 16213495
Peoria FEC ID number of contributing	IL 61637-0001	Amount of Each Receipt this Period
federal political committee.	C	400.00
Name of Employer OSF Saint Francis Medical Center	Occupation Administrator and Chief Executive Of	<u>fi</u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 402.50	
SUBTOTAL of Receipts This Page (optional)		2500.00

Oak Brook FEC ID number of contributing federal political committee. Name of Employer Advocate Health Care	and address of any political committee to s	solicit contributions from such committee.
Mr. Wilfredo Ramos Mailing Address 2025 Windsor Drive City Oak Brook FEC ID number of contributing federal political committee. Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Elena Butkus		
City Oak Brook FEC ID number of contributing federal political committee. Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Elena Butkus		Date of Receipt
Oak Brook FEC ID number of contributing federal political committee. Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Elena Butkus		12 30 2008
FEC ID number of contributing federal political committee. Name of Employer Advocate Health Care Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Elena Butkus	State Zip Code	Transaction ID: 16213497
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Ms. Elena Butkus		Amount of Each Receipt this Period 600.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Elena Butkus	cupation ecutive VP/Chief Operating Officer]
Ms. Elena Butkus	gregate Year-to-Date ▼ 600.00	
Mailing Address 1151 E. Warrenville Road		Date of Receipt
		12 30 YYYYY 12 30 2008
•	State Zip Code	Transaction ID: 16213499
Naperville FEC ID number of contributing federal political committee.	L 60563-9339	Amount of Each Receipt this Period 300.00
Illinoia Haanital Aassaia	cupation ce President, Finance	
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 1206.25	
Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco		Date of Receipt
Mailing Address 1151 East Warrenville Road		12 30 2008
	State Zip Code	Transaction ID: 16213500
Naperville I	60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		300.00
Illinois Hospital Associa	cupation rector of Development	
· · · · · · · · · · · · · · · · · · ·	gregate Year-to-Date ▼ 1206.25	
SUBTOTAL of Receipts This Page (optional)		1

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 231 (check only one) X
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Ed Holzhauer		Date of Receipt
Mailing Address 1755 Maple Lane		12 30 7 2008
City	State Zip Code	Transaction ID: 16213501
Wheaton	IL 60187-3317	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Central DuPage Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1050.02	
Full Name (Last, First, Middle Initial) Ms. Teresa Hursey		Date of Receipt
Mailing Address 1151 East Warrenvill	e Road	12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16213502
<u>Naperville</u>	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President, Finance	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 1206.25	1
Other (specify) ▼	1200.20	
Full Name (Last, First, Middle Initial) Ms. Patricia Merryweather-Arges		Date of Receipt
Mailing Address 1151 E. Warrenville PO Box 3015		12 30 4 2008
City	State Zip Code	Transaction ID: 16213503
Naperville	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1206.25	
OUDTOTAL of Descripto This Descriptors		900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 167 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Howard A. Peters, III Mailing Address 4109 Southwoods F	Road State Zip Code	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16213504
Springfield FEC ID number of contributing federal political committee.	IL 62707-6070	Amount of Each Receipt this Period 300.00
Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date 1206.25	
Full Name (Last, First, Middle Initial) Mr. Kenneth C. Robbins Mailing Address 1531 Maria Court		Date of Receipt 1 2 3 0 7 2 0 0 8
City Wheaton	State Zip Code IL 60187-3777	Transaction ID: 16213505 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Illinois Hospital Associa- tion	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1206.25	
Full Name (Last, First, Middle Initial) Ms. Laraine Williams		Date of Receipt
Mailing Address 1151 E. Warrenville		12 30 7 2008
City Naperville	State Zip Code IL 60563-9339	Transaction ID: 16213506 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Illinois Hospital Associa- tion	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1206.25	
SUBTOTAL of Receipts This Page (optional	•	900.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Christopher R Mosley Mailing Address P O Box 2028 City Chesapeake FEC ID number of contributing federal political committee. Name of Employer Chesapeake General Hospital Receipt For: Primary General	State Zip Code VA 23327-2028 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Gwen S Eddleman, , FACHE, E Mailing Address 1690 Dood St. City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Farmville FEC ID number of contributing federal political committee. Name of Employer Southside Community Hospital Receipt For: Primary General Other (specify)	VA 23901-2783 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 350.00	Amount of Each Receipt this Period 350.00
Full Name (Last, First, Middle Initial) Mr. Brian Cournoyer Mailing Address 110 Barnes Road City Wallingford FEC ID number of contributing federal political committee.	State Zip Code CT 06492-1802	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Manager, Government Relations Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional) >	950.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 231 (check only one) X
\ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any persor dress of any political committee to	n for the purpose of soliciting contributions
	Full Name (Last, First, Middle Initial) Dr. Brian Fillipo, MD Mailing Address 6192 Moores Creek			Date of Receipt
	City Summerfield	State NC	Zip Code 27358-8285	Transaction ID: 16214046 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Connecticut Hospital Association Receipt For:	· ·	sident, Quality and Patient Sa	500.00
_	Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
•	Dr. Susan L Davis, , R.N., Ed Mailing Address 72 north park avenue			Date of Receipt 1 2 3 1 2 0 0 8
	City	State	Zip Code	Transaction ID: 16214047
	Easton FEC ID number of contributing federal political committee.	CT	06612-1417	Amount of Each Receipt this Period 500.00
	Name of Employer St. Vincent's Medical Center Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Officer e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Ms. Patricia L Robertson			Date of Receipt
	Mailing Address 2 Bernardine Drive			12 31 2008
	City	State	Zip Code	Transaction ID: 16214069
	Newport News FEC ID number of contributing federal political committee.	C	23602-4404	Amount of Each Receipt this Period 350.00
	Name of Employer Mary Immaculate Hospital		e Vice President and Adminis	tr
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		······	1350.00
	TOTAL This Period (last page this line number	only)	>	

SCHEDULE A (FEO	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 231 (check only one) X
Any information copied from sor for commercial purposes, of NAME OF COMMITTEE American Hospital Ass	other than using the name and a (In Full)	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mic Mr Carl Bahnlein Mailing Address 1701	Idle Initial) North George Mason Drive		Date of Receipt 1 2 3 1 2 0 0 8
City Arlington	State VA	Zip Code 22205-3698	Transaction ID: 16214071 Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.			350.00
Name of Employer Virginia Hospital Center - Arlington Receipt For: Primary Other (specify) ▼		ve Vice President and COO te Year-to-Date ▼ 350.00	
Full Name (Last, First, Mic Angela Russell Mailing Address 36 She	erry Dell Dr		Date of Receipt 1 2 3 1 2 0 0 8
City	State	Zip Code	Transaction ID: 16214267
Hampton FEC ID number of contributed federal political committee.		23666-1822	Amount of Each Receipt this Period 350.00
Name of Employer Bon Secours-DePaul Med Center	ical Occupati	on Managed Care	
Receipt For: Primary Ge Other (specify) ▼	Aggrega eneral	te Year-to-Date ▼ 350.00	
Full Name (Last, First, Mic Mr. Daniel J. Barchi	ddle Initial)		Date of Receipt
Mailing Address 3701 \	Wellington Drive		12 31 2008
City	State	Zip Code	Transaction ID: 16214269
Roanoke FEC ID number of contributed federal political committee.		24014-6466	Amount of Each Receipt this Period 350.00
Name of Employer Carilion Clinic	Occupati Preside		
Receipt For: Primary Ge Other (specify) ▼		te Year-to-Date ▼ 350.00	
SURTOTAL of Receipts Thi	s Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 231 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jennifer W. Siciliano Mailing Address 8110 Gatehouse Road	1	Date of Receipt
Suite 200 East Tower		12 31 2008
City Falls Church	State Zip Code VA 22042-1210	Transaction ID: 16214274 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation Asst VP Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Peter J. Bernard		Date of Receipt
Mailing Address 5801 Bremo Road		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16214275
Richmond FEC ID number of contributing federal political committee.	VA 23226-1900	Amount of Each Receipt this Period 350.00
Name of Employer Bon Secours-Richmond Comm- unity Hospita	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. William D Jacobsen		Date of Receipt
Mailing Address 540 Jubal Early Hwy		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wirtz	State Zip Code VA 24184	Transaction ID: 16214276 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Franklin Memorial Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
CURTOTAL of Possints This Page (entional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	
Full Name (Last, First, Middle Initial) Mr. Douglas Thompson Mailing Address 6015 Poplar Hall Drive City Norfolk FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify)	State Zip Code VA 23502 C Occupation VP, Reinventing Decision Support Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. J Knox Singleton Mailing Address 8110 Gatehouse Road City Falls Church FEC ID number of contributing federal political committee. Name of Employer Inova Health System Receipt For: Primary General Other (specify)	State Zip Code VA 22042-1210 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 350.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Dr John R Audett, , M.D. Mailing Address 455 Tollgate Road City Warwick FEC ID number of contributing federal political committee. Name of Employer Kent County Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code RI 02886-2770 C Occupation Vice President, Medical Director Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1/3 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Ellen Yoder			Date of Receipt
Mailing Address 802 Reliance Rd	12 31 2008		
City	State	Zip Code	Transaction ID: 16214293
Middletown FEC ID number of contributing federal political committee.	C	22645-3702	Amount of Each Receipt this Period 350.00
Name of Employer Valley Health System	Occupatio Executive	n e Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Schmehl			Date of Receipt
Mailing Address 3221 Sargent Drive	1 2 3 1 2 0 0 8		
City Falls Church	State VA	Zip Code 22044-1614	Transaction ID: 16214295
FEC ID number of contributing federal political committee.	C	22044-1014	Amount of Each Receipt this Period 350.00
Name of Employer Inova Fairfax Hospital	Occupatio Senior D		
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Gerald Seager			Date of Receipt
Mailing Address 7509 Mendota Place)		1 2 3 1 2 0 0 8
City Springfield	State VA	Zip Code 22150-4123	Transaction ID: 16214304
FEC ID number of contributing federal political committee.	C	22130-4123	Amount of Each Receipt this Period 350.00
Name of Employer Inova Health System	Occupatio Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼	_ , '	Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 231 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Richard A. Hanson	,	Date of Receipt
Mailing Address 7848 Crittenden Roa		12 31 2008
City <u>S</u> uffolk	State Zip Code VA 23432-1726	Transaction ID: 16214308 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bon Secours-DePaul Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Wayne Sawyer Mailing Address 4001 River Park Dr.		Date of Receipt
City	State Zip Code	1 2 3 1 2 0 0 8 Transaction ID: 16214311
<u>Suffolk</u>	VA 23435-3356	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bon Secours Hampton Rd	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Chris A Lumsden		Date of Receipt
Mailing Address 2204 Wilborn Avenu	ue	12 31 2008
City	State Zip Code	Transaction ID: 16214899
South Boston FEC ID number of contributing federal political committee.	VA 24592-1645	Amount of Each Receipt this Period 350.00
Name of Employer Halifax Regional Health System	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional) >	1050.00
TOTAL This Period (last page this line number	ber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS) ^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 175 / 231 (check only one)
Any information copied from such Reports or for commercial purposes, other than using	and Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association Page 1		and of any pointed committee to	
Full Name (Last, First, Middle Initial) Mr. John Fay			Date of Receipt
Mailing Address 6623 Madison Mo	1 2 3 1 2 0 0 8		
City McLean	State VA	Zip Code 22101-2902	Transaction ID: 16214912 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	22.101.2002	350.00
Name of Employer Inova Health System	Occupation Vice Pres		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Thomas S Kluge			Date of Receipt
Mailing Address 2204 Wilborn Avenue			1 2 3 1 2 0 0 8
City South Boston	State VA	Zip Code	Transaction ID: 16214922
FEC ID number of contributing federal political committee.	C	24592-1638	Amount of Each Receipt this Period 350.00
Name of Employer Halifax Regional Health	Occupation Chief Ope	erating Officer	
System Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		350.00	
Full Name (Last, First, Middle Initial) Ms. Barbara Doyle			Date of Receipt
Mailing Address 5901 Mount Eagle	e Drive		12 31 2008
City	State	Zip Code	Transaction ID: 16214938
Alexandria FEC ID number of contributing federal political committee.	C	22303-2502	Amount of Each Receipt this Period 350.00
Name of Employer Inova Alexandria Hospital	Occupation CEO	1	
Receipt For: Primary General	Aggregate	Year-to-Date ▼ 350.00	1
Other (specify) ▼	0 0		1

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 231 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Cynda Tipple		Date of Receipt
Mailing Address 973 N. Potomac Stree City	State Zip Code	1 2 3 1 2 0 0 8 Transaction ID: 16215016
Arlington	VA 22205-1649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Prince William Hospital	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Sharon M. Bass, Jr. Mailing Address 2619 Blue Hernon Circ	No.	Date of Receipt
Mailing Address 2019 Blue Herrion Circ	12 31 2008	
City	State Zip Code	Transaction ID: 16215018
Roanoke	VA 24018-5133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Clinic	Occupation Vice President Imaging & Pharmacy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr Gene Burke, , M.D.		Date of Receipt
Mailing Address 600 Gresham Drive		12 31 2008
City	State Zip Code	Transaction ID: 16215019
Norfolk	VA 23507-1999	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Norfolk General Hospital	Occupation Vice President Medical Affairs	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 231 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Barbara Charlton Mailing Address 11797 Troika Court City Woodbridge FEC ID number of contributing federal political committee. Name of Employer Potomac Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 22192-6285 C Occupation Vice President Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Donald E. Lorton Mailing Address 1141 Windy Hill Roa City Goodview FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic Receipt For: Primary General Other (specify)	State Zip Code VA 24095-2909 C Occupation Vice President Aggregate Year-to-Date 350.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Mark Szalwinski Mailing Address 104 Watch Harbour City Smithfield FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify)	Circle State Zip Code VA 23430-2326 C Occupation Director of Pharmacy Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional)	750.00

SCHEDULE ITEMIZED F	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 231 (check only one) X
or for commercial NAME OF CO	opied from such Reports and St purposes, other than using the MMITTEE (In Full) ospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Las Robert Hager Mailing Addres	st, First, Middle Initial)	ane		Date of Receipt
City Purcellville		State VA	Zip Code 20132-1754	Transaction ID: 16215096 Amount of Each Receipt this Period
FEC ID number federal politica	er of contributing I committee.	C		350.00
Name of Empl Inova Health S Receipt For: Primary Other (sp	General		n t Vice President e Year-to-Date ▼ 350.00	
Mr. Patrick L. C	st, First, Middle Initial) hristiansen ss 8377 Pedigrue Ct			Date of Receipt
City		State	Zip Code	Transaction ID: 16215098
Gainesville FEC ID number federal politica	er of contributing I committee.	C	20155-3240	Amount of Each Receipt this Period 350.00
Name of Empl Inova Health S	oyer ystem	Occupation Administ		
Receipt For: Primary Other (s)	General pecify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Las Ms. Debra A Flo	st, First, Middle Initial) pres			Date of Receipt
Mailing Addres	s 3609 Calverton Way			12 31 YYYYY 12008
City		State	Zip Code	Transaction ID: 16215101
Chesapeake FEC ID numbe federal politica	er of contributing	C	23321-4455	Amount of Each Receipt this Period 350.00
Name of Emplo Sentara CareF	oyer Plex Hospital	Occupation Vice Pres	n sident and Administrator	
Receipt For: Primary Other (sp	General pecify) ▼		e Year-to-Date ▼ 350.00	
	Leceipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Mark Bower Mailing Address 1000 Shenandoah Ave City Front Royal FEC ID number of contributing federal political committee. Name of Employer Warren Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 22630-3598 C Occupation Vice President Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Cindy Dolan Mailing Address 10988 N. Harrell's Fer City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer HSLI Receipt For: Primary General Other (specify)	ry Rd. State Zip Code LA 70816-8359 C Occupation President Aggregate Year-to-Date 250.00	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16216332 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Conrad G Flowers Mailing Address 1900 Main Street City Franklinton FEC ID number of contributing federal political committee. Name of Employer Riverside Medical Center Receipt For: Primary General Other (specify)	State Zip Code LA 70438-3688 C Occupation Chief Executive Officer Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		850.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Rick Guevara Mailing Address 200 Henry Clay Av City New Orleans FEC ID number of contributing federal political committee. Name of Employer Children's Hospital	Venue State Zip Code LA 70118-5798 C Occupation Vice-President of Legal Affairs	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16216336 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Bill Hankins Mailing Address P O Box 33932		Date of Receipt 1 2 3 0 2 0 0 8
City Shreveport FEC ID number of contributing federal political committee. Name of Employer	State Zip Code LA 71130-3932 C Occupation	Transaction ID: 16216337 Amount of Each Receipt this Period 250.00
Name of Employer LSU Medical Center-Univer- sity Hospital Receipt For: Primary General Other (specify) ▼	Associate Administrator Aggregate Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Michael Hulefeld Mailing Address 1514 Jefferson Hig	ghway	Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16216338
New Orleans FEC ID number of contributing federal political committee.	LA 70121-2429	Amount of Each Receipt this Period 250.00
Name of Employer Ochsner Health System	Occupation Senior VP and COO	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	nal)	750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each	parate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 181 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold name and address of any	d or used by any persor y political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
. ∠ 	Full Name (Last, First, Middle Initial) Glenn Landry Mailing Address 10988 N. Harrell's Ferr	/ Rd		Date of Receipt
	City	State Zip Co		1 2 3 0 2 0 0 8 Transaction ID: 16216339
	Baton Rouge FEC ID number of contributing federal political committee.	LA 70816	6-8359	Amount of Each Receipt this Period 250.00
	Name of Employer HSLI	Occupation Executive VP		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	250.00	
	Full Name (Last, First, Middle Initial) Donna Shields Mailing Address 1701 Oak Park Boulev	ard		Date of Receipt
	City	State Zip Co	ode	1 2 3 0 2 0 0 8 Transaction ID: 16216342
	Lake Charles FEC ID number of contributing federal political committee.	LA 70601	-8911	Amount of Each Receipt this Period 250.00
	Name of Employer Lake Charles Memorial Hos- pital	Occupation VP Patient Care		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	250.00	
	Full Name (Last, First, Middle Initial) Mr. Michael J Sniffen			Date of Receipt
	Mailing Address 340 1/2 Garden Street			12 30 / Y Y Y Y Y Y Y
	City Hoboken	State Zip Co	ode 0-3802	Transaction ID: 16216343
	FEC ID number of contributing federal political committee.	C	7-3002	Amount of Each Receipt this Period 250.00
	Name of Employer Touro Infirmary	Occupation President/CEO		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	250.00	
	SUBTOTAL of Receipts This Page (optional)		>	750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Terrie Sterling		Date of Receipt
Mailing Address 5000 Hennessy Boule	vard	12 30 2008
City	State Zip Code	Transaction ID: 16216344
Baton Rouge	LA 70808-4375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Our Lady of the Lake Regi- onal Medical	Occupation Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Kevin Bridwell	1	Date of Receipt
Mailing Address 9521 Brookline		12
City	State Zip Code	Transaction ID: 16216345
Baton Rouge	LA 70809-1431	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Louisiana Hospital Associ- ation	Occupation Director of Healthcare Reimburseme	ent
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Coletta Barrett, RN, MHA		Date of Receipt
Mailing Address 5000 Hennessy Boule	vard	12 30 2008
City	State Zip Code	Transaction ID: 16216346
Baton Rouge	LA 70808-4375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Our Lady of the Lake Regi- onal Medical	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Desciots This Days (actions)		1050.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 231 (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	areas or any poniosa sommittee to	
Full Name (Last, First, Middle Initial) Mr. James K Elrod			Date of Receipt
Mailing Address 2600 Greenwood F	M M / D D / Y Y Y Y Y 1 1 2 3 0 0 8		
City Shreveport	State LA	Zip Code 71130-2600	Transaction ID: 16216347 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Willis-Knighton Health Sy- stem	Occupatio Presiden	n t and Chief Executive Office	 r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John J Finan, , Jr.			Date of Receipt
Mailing Address 4200 Essen Lane			12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Baton Rouge	State LA	Zip Code 70809-2196	Transaction ID: 16216348 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70003 2130	500.00
Name of Employer Franciscan Missionaries of Our Lady He Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	' ·	n t and Chief Executive Office e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Ms. Patricia T. Jeter			Date of Receipt
Mailing Address 17853 Prestwick A	venue		12 30 2008
City	State	Zip Code	Transaction ID: 16216349
Baton Rouge FEC ID number of contributing federal political committee.	C	70810-7994	Amount of Each Receipt this Period 500.00
Name of Employer Louisiana Hospital Associ- ation	Occupatio Vice Pres	sident	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (options	al)		1500.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 231 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Delores LeJeune Mailing Address 1125 West Highwa	ay 30	Date of Receipt
City	State Zip Code	Transaction ID: 16216350
Gonzales FEC ID number of contributing federal political committee.	LA 70737-5004	Amount of Each Receipt this Period 500.00
Name of Employer St. Elizabeth Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	_
Full Name (Last, First, Middle Initial) Brandon J Moore Mailing Address 901 Wilson Street		Date of Receipt
City	State Zip Code	Transaction ID: 16216351
Lafayette	LA 70503-2439	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Park Place Surgical Hospi- tal	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Phyllis Peoples, , MSN, R.N		Date of Receipt
Mailing Address P O Box 6037		12 30 4 2008
City	State Zip Code	Transaction ID: 16216352
Houma FEC ID number of contributing federal political committee.	LA 70361-6037	Amount of Each Receipt this Period 500.00
Name of Employer Terrebonne General Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 231 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and add	l y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PA Full Name (Last, First, Middle Initial)	C		
Mr. Stephen F Wright Mailing Address 3330 Masonic Driv	e		Date of Receipt 1 2 3 0 2 0 0 8
City Alexandria	State LA	Zip Code 71301-3899	Transaction ID: 16216353 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer CHRISTUS St. Frances Cabr- ini Hospital Receipt For:	 	n t and Chief Executive Office Year-to-Date ▼	r
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Ms. Karen Sue Zoeller Mailing Address 9521 Brookline Ave	20116		Date of Receipt
	enue		12 30 2008
City	State	Zip Code	Transaction ID: 16216354
Baton Rouge FEC ID number of contributing federal political committee.	C	70809-1431	Amount of Each Receipt this Period 500.00
Name of Employer Louisiana Hospital Associ- ation	Occupation Vice Pres		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. Clark R. Cosse, III			Date of Receipt
Mailing Address 9521 Brookline Ave	enue		12 30 7 2008
City <u>Baton Rouge</u>	State LA	Zip Code 70809-8409	Transaction ID: 16216355 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer Louisiana Hospital Associ- ation Receipt For:		sident, Legal & Government	Aff
Primary General Other (specify) ▼	Aygregate	e Year-to-Date ▼ 625.00	
SUBTOTAL of Receipts This Page (options	21)		1625.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Report or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American Hospital Association I	s and Statements may not be sold or used by any perso sing the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Paul A. Salles Mailing Address 644 Apache Driv City Abita Springs FEC ID number of contributing	State Zip Code LA 70420-3331	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16216356 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) General	Occupation President & Chief Executive Officer Aggregate Year-to-Date 750.00	750.00
Full Name (Last, First, Middle Initial) Mr. Edwin E Dahlberg Mailing Address 2342 S. Swallow	vtail Lane	Date of Receipt
City	State Zip Code	Transaction ID: 16216461
Boise	ID 83706-6127	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Luke's Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Ken L Harman		Date of Receipt
Mailing Address 528 Teton Drive		12 30 2008
City	State Zip Code	Transaction ID: 16216462
<u>Burley</u>	ID 83318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Cassia Regional Medical Center	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (opt	ional)	1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1	
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Steven A. Millard		Date of Receipt	
Mailing Address 615 N. 7th Street City	State Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16216463	
Eagle	ID 83702-5502	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	526.60	
Name of Employer Idaho Hospital Association	Occupation President		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 526.60		
Full Name (Last, First, Middle Initial) Mr. Patrick M Hermanson, , FACHE		Date of Receipt	
Mailing Address 651 Memorial Drive		12 30 7 2008	
City	State Zip Code	Transaction ID: 16216464	
Pocatello	ID 83201-4071	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Portneuf Medical Center	Occupation President and Chief Executive Officer		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Joseph P Caroselli		Date of Receipt	
Mailing Address P O Box 1100		12 30 7 2008	
City	State Zip Code	Transaction ID: 16216465	
Boise	ID 83701-1100	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	201.60	
Name of Employer Idaho Elks Rehabilitation Hospital	Occupation Administrator		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	201.60		
SUBTOTAL of Receipts This Page (optional)		978.20	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number)	<u> </u>	978.20	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Karen J Kellie, , R.N. Mailing Address 3960 Campbell Roa City New Meadows FEC ID number of contributing federal political committee. Name of Employer McCall Memorial Hospital Receipt For: Primary General Other (specify)	State Zip Code ID 83654-5031 C Occupation President and Administrator Aggregate Year-to-Date 530.00	Date of Receipt M M D D Q Q Q D
Full Name (Last, First, Middle Initial) Mr. Joseph E Morris Mailing Address 2003 Lincoln Way City Coeur D Alene FEC ID number of contributing federal political committee. Name of Employer Kootenai Medical Center Receipt For: Primary General Other (specify)	State Zip Code ID 83814-2611 C Occupation Chief Executive Officer Aggregate Year-to-Date 526.60	Date of Receipt 1 2
Full Name (Last, First, Middle Initial) Mr. Craig A Johnson Mailing Address 6640 Kaniksu Street City Bonners Ferry FEC ID number of contributing federal political committee. Name of Employer Boundary Community Hospital Receipt For: Primary General Other (specify)	State Zip Code ID 83805-7532 C Occupation Chief Executive Officer and Chief Final Aggregate Year-to-Date 201.60	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	83.20

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Brian Nall Mailing Address 229 South Seventh Si City Saint Maries FEC ID number of contributing federal political committee. Name of Employer Benewah Community Hospital Receipt For: Primary General Other (specify)	reet State Zip Code ID 83861-1803 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 201.60	Date of Receipt M M
Full Name (Last, First, Middle Initial) Ms. Toni Lawson Mailing Address P.O. Box 1278 City Boise FEC ID number of contributing federal political committee. Name of Employer Idaho Hospital Association Receipt For: Primary General	State Zip Code ID 83701-1278 C Occupation Vice President, Government Affairs Aggregate Year-to-Date 201.60	Date of Receipt M M J D D J Z D O S Transaction ID: 16216528 Amount of Each Receipt this Period 26.60
Full Name (Last, First, Middle Initial) Ms. Stacey Carson Mailing Address 10242 North Blacktail City Boise FEC ID number of contributing federal political committee. Name of Employer Idaho Hospital Association	State Zip Code ID 83714-9695 C Occupation Vice President, Operations	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	Aggregate Year-to-Date ▼ 201.60	79.80

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 231 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,	
Full Name (Last, First, Middle Initial) Mr. Jeffrey W Martin			Date of Receipt
Mailing Address 700 South Main Stre	M M / D D / Y Y Y Y Y 1 1 2 3 0 2 0 0 8		
City Moscow	State ID	Zip Code 83843-3056	Transaction ID: 16216531 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03043-3030	26.60
Name of Employer Gritman Medical Center	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 526.60	
Full Name (Last, First, Middle Initial) Mr. BJ Swanson			Date of Receipt
Mailing Address 1121 Lamb Road			12 30 2008
City Trov	State ID	Zip Code 83871-9619	Transaction ID: 16216532
FEC ID number of contributing federal political committee.	C	03071-9019	Amount of Each Receipt this Period 26.60
Name of Employer Gritman Medical Center	Occupatio Trustee	n	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 201.60	
Full Name (Last, First, Middle Initial) Tom Frazier			Date of Receipt
Mailing Address 1813 Cliffview Dr			1 2 3 1 2 0 0 8
City Plano	State TX	Zip Code 75093-2419	Transaction ID: 16265192
FEC ID number of contributing federal political committee.	C	75093-2419	Amount of Each Receipt this Period 1000.00
Name of Employer Legacy Hospital Partners, Inc.	Occupatio Executive		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	1		1053.20

ITEMIZEI	LE A (FEC Form 3X) D RECEIPTS on conied from such Benorts and St	tatements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 191 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commer	cial purposes, other than using the COMMITTEE (In Full) Hospital Association PAC	name and add	dress of any political committee to	o solicit contributions from such committee.
Mr. Steven Mailing Ad City Kirkland FEC ID nu federal poli Name of E Evergreen Receipt Fo	mber of contributing tical committee. mployer Healthcare	State WA C Occupation Chief Exe	Zip Code 98034-3013 n ecutive Officer Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ms. Pamela Mailing Ad City Seattle FEC ID nu federal poli Name of E Group Hea pital Receipt Fo	mber of contributing tical committee. mployer alth Eastside Hos-	. '	Zip Code 98121-1536 n sident, Public Affairs & Gove	Date of Receipt M M D D Y Y Y Y Y Y Y Y
C. Mr. Len Mc Mailing Ad City Seattle FEC ID nu federal poli Name of E Washingto Associatio Receipt Fo	dress 300 Elliott Avenue Wes Suite 300 mber of contributing tical committee. mployer on State Hospital on the state Hospital on th	State WA C Occupation Governm	Zip Code 98119-4198 n ent Relations Officer Year-to-Date 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	of Receipts This Page (optional) Period (last page this line number of			900.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Greg Reed Mailing Address 2000 Hospital Drive City Sedro Woolley FEC ID number of contributing	State Zip Code WA 98284-4327	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16267779 Amount of Each Receipt this Period 300.00
Receipt For: Primary Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 300.00	300.00
Full Name (Last, First, Middle Initial) Mr. Martin Siegel Mailing Address 747 Broadway Avenue	;	Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16267789
Seattle FEC ID number of contributing federal political committee.	WA 98122-4379	Amount of Each Receipt this Period 250.00
Name of Employer Swedish Health Services	Occupation CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Clarence (Bud) Barnes		Date of Receipt
Mailing Address 101 West Eighth Aver	ue	12 30 2008
City	State Zip Code	Transaction ID: 16267790
Spokane	WA 99204-2307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Sacred Heart Medical Cent- er	Occupation CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		875.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 231 (check only one) X
or for o	formation copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Mr.	l Name (Last, First, Middle Initial) Ryland (Skip) Davis iling Address 101 West Eighth Avenu	ue		Date of Receipt 1 2 3 0 2 0 0 8
City		State	Zip Code	Transaction ID: 16267791
<u>Sp</u>	okane	WA	99204-2307	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		500.00
Na Sa er	me of Employer cred Heart Medical Cent-	Occupatio Chief Exc	n ecutive Officer	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
Mr.	I Name (Last, First, Middle Initial) Gary Kaplan iling Address 1100 Ninth Avenue			Date of Receipt
				12 30 2008
City	y eattle	State WA	Zip Code 98101-2799	Transaction ID: 16267792
FE	C ID number of contributing eral political committee.	C	30101-2793	Amount of Each Receipt this Period 500.00
Na Vir	me of Employer ginia Mason Medical Ce- er	Occupatio Chief Exc	n ecutive Officer	
Re	ceipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 500.00]
	I Name (Last, First, Middle Initial) Joseph M Kortum			Date of Receipt
Ma 	iling Address P O Box 1600			12 30 7 9 9 9
City	•	State	Zip Code	Transaction ID: 16267793
FE	ncouver C ID number of contributing leral political committee.	C	98668-1600	Amount of Each Receipt this Period 250.00
<u>cal</u>	me of Employer uthwest Washington Medi- Center	Occupatio Presiden	n t and Chief Executive Office	r
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBT	FOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	Id Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Sarah Patterson		Date of Receipt
Mailing Address 1100 Ninth Avenue		12 30 7 2008
City <u>Seattle</u>	State Zip Code WA 98101-2756	Transaction ID: 16267794 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Virginia Mason Medical Ce- nter	Occupation Executive VP/Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John R White	_	Date of Receipt
Mailing Address 801 East Wheeler F		12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Moses Lake</u>	State Zip Code WA 98837-1820	Transaction ID: 16267795 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Samaritan Healthcare	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	
Full Name (Last, First, Middle Initial) Mr. Alan R Yordy		Date of Receipt
Mailing Address 14432 SE Eastgate	Way, Ste 300	12 30 YYYYY 10008
City	State Zip Code	Transaction ID: 16267796
Bellevue FEC ID number of contributing federal political committee.	WA 98007-6493	Amount of Each Receipt this Period 500.00
Name of Employer PeaceHealth	Occupation President and Chief Executive Officer	1
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (optional	l)	1500.00
TOTAL This Period (last page this line num	ber only)	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Champi Krenik Mailing Address 605 Upland Place City Alexandria FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code VA 22301-2743 C Occupation Director, Federal Legislative Affairs Aggregate Year-to-Date 225.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest E City Manasquan FEC ID number of contributing federal political committee.	State Zip Code NJ 08736-4001	Date of Receipt M M M
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Chief Information Officer Aggregate Year-to-Date 245.00	
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Aven	ue	Date of Receipt 1 2 2 6 2 0 0 8
City Pennington FEC ID number of contributing	State Zip Code NJ 08534-2302	Transaction ID: 16276504 Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association Receipt For: Primary Other (specify)	Occupation General Counsel Aggregate Year-to-Date 375.00	3.00
SUBTOTAL of Receipts This Page (optional)		160.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 196 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Road City Langhorne	State Zip Code PA 19047-2306	Date of Receipt 1 2 2 6 2 0 0 8 Transaction ID: 16276505 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Vice President, Human Resources Aggregate Year-to-Date 245.00	5.00
Full Name (Last, First, Middle Initial) Mr. David P. Lavins Mailing Address 10 Fox Chase Road		Date of Receipt 1 2 2 6 2 0 0 8
City	State Zip Code	Transaction ID: 16276509
Malvern FEC ID number of contributing federal political committee.	PA 19355-3441	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Chief Financial Officer Aggregate Year-to-Date 495.00	
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt
Mailing Address 6180 Lower Mountain		12 26 2008
City New Hope	State Zip Code PA 18938-5760	Transaction ID: 16276512
FEC ID number of contributing federal political committee.	C 16930-3760	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ 370.03	
SUBTOTAL of Receipts This Page (optional)		15.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 231 (check only one) X
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
∠_ A.	Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr. Mailing Address 4 Poppy Lane City Howell	State Zip Code NJ 07731-1451	Date of Receipt 1 2 2 6 2 0 0 8 Transaction ID: 16276522
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP Health Economics Aggregate Year-to-Date 245.00	
3.	Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane		Date of Receipt
	City Livingston	State Zip Code NJ 07039-2750	Transaction ID: 16276529 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5.00
	Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President Continuing Care Service Aggregate Year-to-Date ▼ 245.00	De
	Full Name (Last, First, Middle Initial) Dr. Melinda Estes, , M.D. Mailing Address 111 Colchester Avenue	3	Date of Receipt
	City Burlington	State Zip Code VT 05401-1473	1 2 1 2 2 0 0 8 Transaction ID: 16282068
	FEC ID number of contributing federal political committee.	C 03401-1473	Amount of Each Receipt this Period 350.00
	Name of Employer Fletcher Allen Health Care	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
SI	JBTOTAL of Receipts This Page (optional)	>	360.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 198 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A C	Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political committ	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Ms. Katie Vaughan		Date of Receipt
	Mailing Address 506A East Howell Ave	nue	12 31 2008
	City	State Zip Code	Transaction ID: PR1034595121839
	Alexandria	VA 22301-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	12 31 7 2008	
	City	State Zip Code	Transaction ID: PR1045726221839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation VP & Chief Washington Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		12 31 2008
	City	State Zip Code	Transaction ID: PR1113464221839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Section Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Г	OUDTOTAL of Descripts This Description		98.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any p name and address of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Davon Gray		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1143013021839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.49
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify)	Occupation Legislative Assistant Aggregate Year-to-Date 350.00	P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Erin O'Malley		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR1222125721839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.80
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Project Manager	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. David L. Allen	L	Date of Receipt
	Mailing Address 325 Seventh Street, N	W	12 31 2008
	City	State Zip Code	Transaction ID: PR1234662821839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Associate Director, Media Relatio	ns
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
	CURTOTAL of Possints This Page (entional)		81.29

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 200 / 231 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
Mailing Address One North Franklin		12 31 7 2008
City <u>Chicago</u>	State Zip Code IL 60606-3436	Transaction ID: PR1260472921839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.00
Name of Employer American Organization of Nurse Executi	Occupation Director of Professional Practice	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Michelle Marie Mathy		Date of Receipt
Mailing Address 1660 Lanier PL Apt. 4		12 31 YYYY 12 31 2008
City	State Zip Code	Transaction ID: PR1300853721839
Washington	DC 20009-2938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manager/PAC Coordinator	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Alex White, Jr.		Date of Receipt
Mailing Address One North Franklin		1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1339349921839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	108.00
Name of Employer American Hospital Associa- tion	Occupation Account Executive	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1500.00	P/R Deduction (\$58.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		136.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 201 / 231 (check only one) X 11a
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. <u>/_</u>	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347703421839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General	Occupation VP, Operations and Account Service Aggregate Year-to-Date ▼	s P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	500.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay Mailing Address One North Franklin		Date of Receipt
	City	State Zip Code	1 2 3 1 2 0 0 8 Transaction ID: PR1347703621839
	<u>Chicago</u>	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Catherine D. Sewell		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y 1 1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: PR1347708421839
	Chicago FEC ID number of contributing	IL 60606-3436	Amount of Each Receipt this Period 99.00
	federal political committee. Name of Employer	Occupation	
	American Hospital Associa- tion-Chicago Receipt For:	Executive Director Aggregate Year-to-Date	_
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ,	SUPPORAL of Pagainte This Paga (antional)		139.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		12 31 2008
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347791021839
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 14.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Director of Operations, AONE Aggregate Year-to-Date	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	12 31 2008	
	City	State Zip Code	Transaction ID: PR1384065321839
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relation	is i
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	500.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake		Date of Receipt
	Mailing Address One North Franklin		12 31 2008
	City	State Zip Code	Transaction ID: PR1492459921839
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Associate Executive Director - ASHI Aggregate Year-to-Date	HRA
	Primary General Other (specify)	350.00	P/R Deduction (\$20.00 Bi- Weekly)
	CURTOTAL of Descirte This Dags (actional)	<u> </u>	60.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 231 (check only one) X
An	for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Linda Fishman		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N	12 31 7 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327629121839
	FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period 64.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Vice President, Public Policy Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Deborah F. Weiner Mailing Address 11004 Petersborough	Drivo	Date of Receipt
		12 31 2008	
	City Rockville	State Zip Code MD 20852-3249	Transaction ID: PR327745921839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Director, Grassroots Advocacy	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue		Date of Receipt
	Mailing Address 122 N. Greenwood Ave	enue	12 31 2008
	City	State Zip Code	Transaction ID: PR327771621839
	Park Ridge FEC ID number of contributing federal political committee.	IL 60068-3227	Amount of Each Receipt this Period 14.00
	Name of Employer American Hospital Association-Chicago	Occupation Associate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	UPTOTAL of Provide This Prove (self-ord)		103.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
_	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik			Date of Receipt
	Mailing Address One North Franklin			12 31 7 2008
	City Chicago	State IL	Zip Code 60606-3436	Transaction ID: PR327777221839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Director,	n Long-Term Care	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock			Date of Receipt
	Mailing Address 1022 S. Harvey Avenue			12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327777821839
	Oak Park	<u> L</u>	60304-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Vice Pre	n sident, Member Relations	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele			Date of Receipt
	Mailing Address 1003 Kimberly Place			12 31 YYYY 2008
	City	State	Zip Code	Transaction ID: PR327801721839
	Great Falls	VA	22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer American Hospital Associa- tion-Washingt	, '	e Vice President	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)	1		54.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(Check only one)
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		12 31 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327812021839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Organization of Nurse Executi	Occupation Executive Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.0	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
	Mailing Address 6034 North 22nd Stree	12 31 2008	
	City	State Zip Code	Transaction ID: PR327831721839
	Arlington	VA 22205-3408	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.0	0 P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan		Date of Receipt
	Mailing Address One North Franklin Str	eet	12 31 2008
	City	State Zip Code	Transaction ID: PR327846221839
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Meetings & Trav	rel Serv
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.0	P/R Deduction (\$14.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)		98.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 231 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga		Date of Receipt
Mailing Address 2401 Calvert Street, N Apt. 1008	W	12 31 2008
City	State Zip Code	Transaction ID: PR327851921839
Washington	DC 20008-2614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa-	Occupation Director, Policy Development	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Mark Seklecki		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2008
City	State Zip Code	Transaction ID: PR327858021839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	64.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Political Affairs	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. John F. Barry	l	Date of Receipt
Mailing Address One North Franklin		1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327877821839
Millis	MA 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	64.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
SURTOTAL of Receipts This Page (entional)		148.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom		Date of Receipt
Mailing Address 130 North Garland Co #3002		12 31 2008
City	State Zip Code	Transaction ID: PR327895721839
Chicago	IL 60602-4750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Judy Williams		Date of Receipt
Mailing Address One North Franklin Str	eet	1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327918921839
Chicago	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	27.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Membership Admin.	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard J Umbdenstock		Date of Receipt
Mailing Address 325 Seventh Street, N' Suite 700	V	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR328132821839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	64.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000	P/R Deduction (\$39.00 Bi- Weekly)
		111.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 231 (check only one) X 11a
A 0	ny information copied from such Reports and sort for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
١.	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
	Mailing Address 204 7th Ave City	State Zip Code	12 31 2008
	La Grange	IL 60525-6406	Transaction ID: PR328136921839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	5
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
-	Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
	Mailing Address One North Franklin St	12 31 7 2008	
	City	State Zip Code	Transaction ID: PR328174921839
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, SHSMD	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian	1	Date of Receipt
	Mailing Address 5545 North Wayne		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328223821839
	Chicago	IL 60640-1318	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ.	SUBTOTAL of Receipts This Page (optional) .	'	154.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 231 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.		Date of Receipt
Mailing Address 13106 Vingle Lane		12 31 7 2008
City Silver Spring	State Zip Code MD 20906	Transaction ID: PR328224921839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	64.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
Mailing Address 1093 N. Faldo Way		12 31 2008
City	State Zip Code	Transaction ID: PR328241421839
Eagle	ID 83616-5369	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	582.50	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack		Date of Receipt
Mailing Address 3475 North Venice Str	eet	1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR328260921839
Arlington	VA 22207-4446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	64.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		148.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ie (crieck offly offe)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by a name and address of any political comr	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard H. Wade		Date of Receipt
Mailing Address 1221 Cavalier Road		12 / 31 / 2008
City	State Zip Code MD 21012-2126	Transaction ID: PR328310421839
Arnold FEC ID number of contributing	MD 21012-2126	Amount of Each Receipt this Period 40.00
federal political committee.	Occupation	
Name of Employer American Hospital Associa- tion-Washingt	Sr. Vice President, Communic	ations
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000	
Full Name (Last, First, Middle Initial) Ms. Lori M. Schor		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V	12 31 2008
City	State Zip Code	Transaction ID: PR328341821839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	64.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Political Action & Gra	ussroot
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	1000	00 P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	V	1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: PR328490121839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.12
Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350	.00 P/R Deduction (\$10.00 Bi-Weekly)
CURTOTAL of Descirts This Desc (entional)		123.12

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate for each cate Detailed Sun	e schedule(s) egory of the	FOR LINE NUMBER: PAGE 211 / 231 (check only one) X
Ai	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or uname and address of any poli	used by any person f tical committee to so	for the purpose of soliciting contributions slicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/_</u>	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
	Mailing Address 200 Clover Hill Court			12 / 31 / 2008
	City Yardley	State Zip Code PA 19067-573	36	Transaction ID: PR328511821839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		64.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Regional Executive Aggregate Year-to-Date	7	
	Primary ☐ General Other (specify) ▼		1000.00	P/R Deduction (\$39.00 Bi- Weekly)
-	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell			Date of Receipt
	Mailing Address 1501 N. Harrison Stre	12 31 YYYY 12 31 2008		
	City	State Zip Code		Transaction ID: PR328512021839
	Arlington	VA 22205-272	26	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Media	Relations	
	Receipt For:	Aggregate Year-to-Date	7	
	Primary ☐ General Other (specify) ▼		500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey			Date of Receipt
	Mailing Address One North Franklin St	eet		M M / D D / Y Y Y Y Y 1 2 0 0 8
	City	State Zip Code		Transaction ID: PR329013421839
	Chicago	IL 60606		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Director, Psychiatric at Aggregate Year-to-Date		
	Primary General Other (specify) ▼	Aggregate roat to bate	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)			104.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212 / 231 (check only one) X 11a
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may re e name and addr	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
. <u>/</u> _	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD			Date of Receipt
	Mailing Address 1 North Franklin SAtre	eet		12 31 2008
	City Chicago	State IL	Zip Code 60614	Transaction ID: PR329071321839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		64.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify)	, '	& COO, Leadership & Bus /ear-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			1 2 3 1 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR329084421839
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Ass	sociate Director Executive	Br
	Receipt For:	Aggregate \	/ear-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese			Date of Receipt
	Mailing Address 500 Interstate Boulevard South			12 31 2008
	City	State	Zip Code	Transaction ID: PR329215721839
	<u>Nashville</u>	TN	37210-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional E		
	Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			148.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213 / 231 (check only one) X
ny information copied from such Reports and S	Statements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	o marino ario aos	arobe of arry political committee to	o contractions from each committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. John Evans			Date of Receipt
Mailing Address One North Franklin St	reet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR329342621839
Chicago	IL	60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		14.00
Name of Employer American Hospital Associa- tion-Chicago	Occupatio CFO	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris			Date of Receipt
Mailing Address 1136 W. Farwell Ave.			12
City	State	Zip Code	Transaction ID: PR329654221839
Chicago	IL	60626-3861	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		14.00
Name of Employer American Hospital Associa- tion-Chicago	Occupatio Executive	n e Director, ASDVS	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Patricia Meersman			Date of Receipt
Mailing Address One North Franklin			12 31 2008
City	State	Zip Code	Transaction ID: PR330343321839
Chicago	IL	60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer American Hospital Associa- tion-Chicago	Occupatio Executive	n e Services Director	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	P/R Deduction (\$20.00 Bi- Weekly)
UBTOTAL of Receipts This Page (optional) .	1		48.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 231 (check only one) X	
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt	
Mailing Address One North Franklin		12 31 2008	
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330411621839 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	20.00	
Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Executive		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)	
Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron		Date of Receipt	
Mailing Address 325 Seventh Street, N Suite 700	Suite 700		
City	State Zip Code	Transaction ID: PR330465221839	
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 28.00	
Name of Employer American Hospital Associa- tion-Washingt	Occupation Asst. General Counsel		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)	
Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt	
Mailing Address 4960 138th Cricle We	st	12 31 2008	
City Apple Valley	State Zip Code MN 55124	Transaction ID: PR330475421839	
Apple Valley FEC ID number of contributing federal political committee.	C SS124	Amount of Each Receipt this Period 64.00	
Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Regional Executive Aggregate Year-to-Date		
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)	
SURTOTAL of Receipts This Page (optional)		112.00	

ation copied from such Reports and Statercial purposes, other than using the recial purposes, other than using the recial purposes, other than using the rescription of the recial purposes, other than using the rescription of the recial purposes, other than using the recial purposes. The committee is a committee in the recipion of t	State Zip Code VA 22205-1609 C Occupation Sr. Associate Director Aggregate Year-to-Date	Date of Rece M M M	sipt D 3 1
can Hospital Association PAC ne (Last, First, Middle Initial) nifer E. Mallard Address 6109 North 9th Road on number of contributing political committee. If Employer an Hospital Associashingt For: imary General ther (specify) ne (Last, First, Middle Initial) e O'Dell Address One North Franklin	VA 22205-1609 C Occupation Sr. Associate Director Aggregate Year-to-Date ▼ 50 State Zip Code	Transaction Amount of Ea P/R Deduction Weekly) Date of Rece	3 1 2 0 0 8 ID: PR330534321839 ach Receipt this Period 20.00 on (\$20.00 Bi-
Address 6109 North 9th Road On number of contributing political committee. If Employer an Hospital Associashingt For: Imary General ther (specify) Ine (Last, First, Middle Initial) Ine O'Dell Address One North Franklin	VA 22205-1609 C Occupation Sr. Associate Director Aggregate Year-to-Date ▼ 50 State Zip Code	Transaction Amount of Ea P/R Deduction Weekly) Date of Rece	3 1 2 0 0 8 ID: PR330534321839 ach Receipt this Period 20.00 on (\$20.00 Bi-
number of contributing political committee. If Employer an Hospital Associashingt For: imary General ther (specify) In e (Last, First, Middle Initial) e O'Dell Address One North Franklin	VA 22205-1609 C Occupation Sr. Associate Director Aggregate Year-to-Date ▼ 50 State Zip Code	P/R Deduction Date of Rece	3 1 2 0 0 8 ID: PR330534321839 ach Receipt this Period 20.00 on (\$20.00 Bi-
number of contributing political committee. f Employer an Hospital Associashingt For: imary General ther (specify) ne (Last, First, Middle Initial) e O'Dell Address One North Franklin	VA 22205-1609 C Occupation Sr. Associate Director Aggregate Year-to-Date ▼ 50 State Zip Code	P/R Deduction Weekly) Date of Rece	ach Receipt this Period 20.00 on (\$20.00 Bi-
f Employer an Hospital Associashingt For: imary General ther (specify) Ine (Last, First, Middle Initial) The O'Dell Address One North Franklin	Occupation Sr. Associate Director Aggregate Year-to-Date 50 State Zip Code	Date of Rece	on (\$20.00 Bi-
shingt For: imary General ther (specify) ▼ ne (Last, First, Middle Initial) e O'Dell Address One North Franklin	Sr. Associate Director Aggregate Year-to-Date ▼ 500 State Zip Code	Date of Rece	eipt 2008
imary General ther (specify) ne (Last, First, Middle Initial) e O'Dell Address One North Franklin	State Zip Code	Date of Rece	eipt 2008
Address One North Franklin		12	31 2008
		1 2	31 2008
10		Transaction	ID: PR330547721839
<u> </u> 0	IL 60606-3436		
and the second s		Amount of Ea	ach Receipt this Period
number of contributing political committee.	C		20.00
f Employer n Hospital Associa- cago	Occupation Vice President, Strategic Pla	nning	
For: General	Aggregate Year-to-Date ▼	D/D D . 1 . 1'	(Φ00 00 D)
ther (specify)	50	0.00 P/R Deduction Weekly)	on (\$20.00 Bi-
ne (Last, First, Middle Initial) en O'Keefe		Date of Rece	eipt
Address 172 Atteridge		1 2	^D 31
	State Zip Code		ID: PR330549221839
	IL 60045-1715	Amount of Ea	ach Receipt this Period
political committee.			20.00
an Hóspital Associa- cago	Vice President, Member Rela	ations	
For: General		P/P Doduction	on (\$20 00 Bi
ther (specify)	50	0.00 P/R Deduction Weekly)	ΟΠ (ΦΖΟ.ΟΟ DI-
			60.00
f	Employer n Hospital Associa- cago For:	orest IL 60045-1715 number of contributing olitical committee. Employer n Hospital Associacago For: Imary General IL 60045-1715 Occupation Vice President, Member Relations Aggregate Year-to-Date ▼	State Zip Code IL 60045-1715 Amount of E Imployer of Contributing olitical committee. Imployer of Hospital Association of the Company of

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 216 / 231 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
_	Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W		12 31 2008
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR330776121839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General	, ' 	vocacy & Member Communi e Year-to-Date ▼ 500.00	cations P/R Deduction (\$20.00)
	Other (specify) Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.			Date of Receipt
	Mailing Address 1101 N. Kentucky Stre	12 31 7 2008		
	City	State	Zip Code	Transaction ID: PR331278821839
	Arlington FEC ID number of contributing federal political committee.	C	22205-3515	Amount of Each Receipt this Period 14.00
	Name of Employer American Hospital Associa- tion-Washingt		State Issues Forum	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush			Date of Receipt
	Mailing Address 26 West Glendale Ave).		1 2 3 1 2 0 0 8
	City	State	Zip Code	Transaction ID: PR331304221839
	Alexandria	VA	22301-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	, '	Advocacy and Public Policy e Year-to-Date ▼	Ор
	Primary General Other (specify) ▼	33 13411	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	ı		54.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 217 / 231 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may re e name and addre	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		12 31 2008
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR331379121839
	FEC ID number of contributing federal political committee.	C	20004-2010	Amount of Each Receipt this Period 14.00
	Name of Employer American Organization of Nurse Executi	, '	ederal Relations & Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		12 31 2008
	City	State DC	Zip Code	Transaction ID: PR331386921839
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 28.68
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Ass	sociate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Alexander R. White, Sr.	1		Date of Receipt
	Mailing Address PO Box 15587			12 31 2008
	City	State	Zip Code	Transaction ID: PR331416021839
	Austin FEC ID number of contributing federal political committee.	C	78761-5587	Amount of Each Receipt this Period 108.00
	Name of Employer American Hospital Associa- tion	Occupation Regional E	Executive	
	Receipt For: Primary General Other (specify) ▼	, ' - <u>'</u>	/ear-to-Date ▼ 1500.00	P/R Deduction (\$58.00 Bi- Weekly)
	UBTOTAL of Receipts This Page (optional)	1		150.68

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 218 / 231 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		12 31 2008
	City Falls Church	State Zip Code VA 22046-2613	Transaction ID: PR331533221839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial)	0 0 0 0 0 0 0 0	
	Ms. Elizabeth Summy Mailing Address One North Franklin		Date of Receipt 1 2 3 1 2 2 0 0 8
	City	State Zip Code	Transaction ID: PR346168121839
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	B/B B - 1 - 1' (011 00 B)
	Other (specify)	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2008
	City	State Zip Code	Transaction ID: PR517619721839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Re	lati
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1	142.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persole name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Carlos Jackson		Date of Receipt
Mailing Address 325 Seventh Street, N		12 31 2008
City	State Zip Code	Transaction ID: PR566280921839
Washington	DC 20004-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	47.61
Name of Employer American Hospital Associa-	Occupation Associate Director, Federal Relations	
tion-Washingt Receipt For:	Associate Director, i ederal Relations Aggregate Year-to-Date ▼	4
Primary General		P/R Deduction (\$20.00 Bi-
Other (specify) ▼	500.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
Mailing Address 606 S. Royal St.		12 31 7 2008
City	State Zip Code	Transaction ID: PR766023721839
Alexandria	VA 22314-4142	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director, Policy	1
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	NW	1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: PR801366321839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Dir. Policy Developn	n e
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		81.61

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 231 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky		Date of Receipt
Mailing Address 325 Seventh Street, Suite 700		12 31 7 2008
City	State Zip Code	Transaction ID: PR876637221839
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 14.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General	Occupation Senior Associate Director Aggregate Year-to-Date ▼	D/D D. I. vi. v. (014.00 D.
Other (specify)	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows		Date of Receipt
Mailing Address 325 Seventh Street, I Suite 700		12 / 31 / 2008
City	State Zip Code DC 20004-2818	Transaction ID: PR936292321839
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 14.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director of Operations	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. David A. Strickland		Date of Receipt
Mailing Address One N. Franklin Stre	et	1 2
City	State Zip Code	Transaction ID: PR939603921839
Chicago	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.00
Name of Employer American Organization of Nurse Executi	Occupation Director of Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		42.00
,	·	194188.82

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 221 / 231 (check only one) 11a 11b 11c X 12 13 14 15 16
ny information copied from such Reports and strong roommercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587		Date of Receipt
City	State Zip Code	12 09 2008
Austin	TX 78761-5587	Transaction ID: 16162639 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00301325	14000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 77000.00	
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal		Date of Receipt
Mailing Address Post Office Box 8600	12 08 2008	
City	State Zip Code	Transaction ID: 16173021
<u>Harrisburg</u>	PA 17105-8600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00128082	6500.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	86500.00	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal		Date of Receipt
Mailing Address 1215 K Street Suite 800		12 19 2008
City	State Zip Code CA 95814	Transaction ID: 16179238
Sacramento FEC ID number of contributing federal political committee.	CA 95814 C C00237495	Amount of Each Receipt this Period 10000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	\dashv
Primary General Other (specify) ▼	115000.00	
SUBTOTAL of Receipts This Page (optional) .	1	30500.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 231 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pere name and address of any political committee	son for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal		Date of Receipt
Mailing Address Post Office Box 8600	7.0	12 23 2008
City Harrisburg	State Zip Code PA 17105-8600	Transaction ID: 16196088 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00128082	2500.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 89000.00	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federa Mailing Address 1215 K Street		Date of Receipt
Suite 800		12 29 2008
City Sacramento	State Zip Code CA 95814	Transaction ID: 16196100 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00237495	10000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 125000.00	
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal	1	Date of Receipt
Mailing Address P.O. Box 15587		12 31 2008
City	State Zip Code	Transaction ID: 16198491
Austin FEC ID number of contributing federal political committee.	TX 78761-5587 C C00301325	Amount of Each Receipt this Period 9000.00
Name of Employer	Occupation	\dashv
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 86000.00	
SUBTOTAL of Receipts This Page (optional) .	1	21500.00

SCHEDULE A (FEC Form 3X)		Lieu comente colonidado	FOR LINE NUMBER: PAGE 223 / 231	
		Use separate schedule(s)	(check only one)	
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c X 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Staten for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC			Date of Receipt
	Mailing Address 5510 Research Park Drive	•		12 31 2008
	City	State	Zip Code	Transaction ID: 16216359
	Madison	WI	53725-9038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0359455	1450.00
	Name of Employer C	Occupation	1	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General Other (specify)	33 0	11450.00	

SUBTOTAL of Receipts This Page (optional)	•	1450.00
TOTAL This Period (last page this line number only)	•	53450.00

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 224 / 231
		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)		
\rangle	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) HCA Good Government Fund-Federal PAC		Date of Receipt
	Mailing Address On Park Plaza PO Box 550		12 23 7 2008
	City State	Zip Code	Transaction ID: 16193350
	Nashville TN	37202-0550	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	0067231	5000.00
	Name of Employer Occupation	on	
	Receipt For: Primary General Other (specify)	e Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	5000.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers dress of any political committee to	FOR LINE NUMBER: PAGE 225 / 231 (check only one) 11a 11b 11c 12 13 14 15 16 X 17 on for the purpose of soliciting contributions of solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW City	State	Zip Code	Date of Receipt M
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		393.70
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5473.03	Interest
В.	Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
	Mailing Address 1400 G Street, NW			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 16275859
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		336.17
	Name of Employer	Occupatio	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5079.33	Interest

SUBTOTAL of Receipts This Page (optional)		729.87
SOBTOTAL OF Receipts This Page (optional)		
TOTAL This Period (last page this line number only)	•	729.87

В.

C.

SCHEDULE B (FEC Form 3X)	schedule(s)			T .	NE NUMBER: PAGE only one)							226	226 / 231		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			Ė	21b 27		22 28a	Х	23 28b		24 28c	F	25 29	П	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														5	
NAME OF COMMITTEE (In Full) American Hospital Association PAC															
Full Name (Last, First, Middle Initial) Green Mountain PAC							Trans Date of				16164	101			
Mailing Address PO Box 1142								M) (Ž	οŏε	3 Y	
		o Code 5601					Amou	nt o	f Each	ı D	Disburse	men	t this I	Perio	d
Purpose of Disbursement 2008 Contribution				01	11		L.	_				25	500.0)	
Candidate Name Green Mountain PAC				te Ty	gory/ pe										
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify)	General				:	2008 (Cor	ntribu	tic	on				
Full Name (Last, First, Middle Initial) Mikulski For Senate Committee							Date o	of Di	sburs	en				V	
Mailing Address P.O. Box 13147							1 ^M 2	М) §		Ž	0 0 8	3	
•		Code 1203					Amou	nt o	f Each	ı D	Disburse	-			d
Purpose of Disbursement Contribution				01			L.	•	•			10	0.00	J	
Candidate Name Sen. Barbara A. Mikulski	mont For	2010		te Ty	gory/ pe										
X Senate X President	ment For: Primary Other (specify)	2010 General					Contri	but	ion						
State: MD District: Full Name (Last, First, Middle Initial)						+	T		ID		1010	100			
Cummings For Congress Campaign Comm	nittee						Date o		sburs	en				Υ	
Mailing Address PO Box 1631							12) &		2	0 0 8	3	
Baltimore		o Code 1203					Amou	nt o	f Each	ı D	Disburse	-	t this I		d
Purpose of Disbursement Contribution				01	11			-			-	10	0.00	J	
Candidate Name Rep. Elijah E. Cummings			Ca	ate	gory/ pe										
	ment For: Primary Other (specify)	2010 General					Contri	but	ion						
State: MD District: 07	Julio (Specify)	▼													
SUBTOTAL of Disbursements This Page (optional) .					<u> </u>				•			45	00.00)	

TOTAL This Period (last page this line number only)

ITEN		•		Jse sepa	rate schedule(s)			-	PAGE 227 / 23
	MIZED DIS	SBURSEMEN [®]	TS f	or each d	category of the Summary Page	F	(check onl 21b 27	y one) 22 X 23 24 28a 28b 28c	25 29
Any In	nformation copie	ed from such Reports	and Statement	s may no	ot be sold or used	d by ar	ny person t	for the purpose of soliciting of soliciting of soliciting of soliciting of soliciting of the solicities of the solicitie	contributions
\ NA	AME OF COMM	AITTEE (In Full) Dital Association Pa		a dadi ot	o or any pomioa				
		First, Middle Initial) For Congress						Transaction ID: 1616 Date of Disbursement	5872
Ma	ailing Address	PO Box 38585						12 / 10 /	2008
Cit Da	ty allas		Stat TX		Zip Code 75238			Amount of Each Disburs	
Vo	urpose of Disbu oid of 10/08 che andidate Name					-)11		-1000.00
Re	ep. Pete Sess		Disburseme	at Fav.	2008		egory/ ype		
	ffice Sought:	X House Senate President	Pr	nt For: imary her (spe	X General			Void of 10/08 check	
Fu	•	District: 32 First, Middle Initial) nzalez Congression	l nal Campaig	n				Transaction ID: 1616 Date of Disbursement	5877
Ma	ailing Address	PO Box 12612						12 / 11 /	^Y 2008 ^Y
Cit Sa	ty an Antonio		Stat TX		Zip Code 78212			Amount of Each Disburs	ement this Perio
Pυ	urpose of Disbu					C	011		-2000.00
Vo	JIG OF 10/00 CHE	CK					,		
Ca	andidate Name ep. Charles A						egory/ ype		
Ca Re Of	andidate Name ep. Charles A ffice Sought:	x House Senate President		nt For: imary her (spe	2008 X General cify) ▼			Void of 10/08 check	
Ca Re Of	andidate Name ep. Charles A ffice Sought: ate: TX	A. Gonzalez X House Senate President District: 20 First, Middle Initial)	Pr	imary	X General			Void of 10/08 check Transaction ID: 1617 Date of Disbursement	6348
Ca Re Of Sta Fu Al	andidate Name ep. Charles A ffice Sought: ate: TX ull Name (Last,	A. Gonzalez X House Senate President District: 20 First, Middle Initial) Congress P.O. Box 20174	Pr Ot	imary	X General			Transaction ID: 1617	6348 Y 2008
Sta Fu Al Cit	andidate Name ep. Charles Affice Sought: ate: TX Ill Name (Last, I Green For Cailing Address	A. Gonzalez X House Senate President District: 20 First, Middle Initial) Congress	Pr Ot	imary her (spe	X General			Transaction ID: 1617 Date of Disbursement	Y Y O O 8 Y Sement this Period
Ca Ree Of Sta Fu Al Ma Cit Ho Pu Vo	andidate Name ep. Charles Affice Sought: ate: TX Ill Name (Last, I Green For Calling Address ty ouston urpose of Disbuild of 10/08 che	A. Gonzalez X. House Senate President District: 20 First, Middle Initial) congress P.O. Box 20174 Suite 321	Pr Ot	imary her (spe	X General cify) ▼ Zip Code	Т		Transaction ID: 1617 Date of Disbursement	^Y 2008 ^Y
Car Ree Off State Al Material Citt Houvo Car Ree	andidate Name ep. Charles A ffice Sought: ate: TX III Name (Last, I Green For C ailing Address ty ouston urpose of Disbu bid of 10/08 che andidate Name ep. Al Green	A. Gonzalez X. House Senate President District: 20 First, Middle Initial) congress P.O. Box 20174 Suite 321	Pr Ot	imary her (spe	X General cify) ▼ Zip Code	CC	ype	Transaction ID: 1617 Date of Disbursement	Y Y O O 8 Y Sement this Period
State Off State Off	andidate Name ep. Charles Affice Sought: ate: TX Ill Name (Last, I Green For Calling Address ty ouston urpose of Disbuid of 10/08 cheandidate Name	A. Gonzalez X. House Senate President District: 20 First, Middle Initial) congress P.O. Box 20174 Suite 321	Stat TX Disbursemee	imary her (spe	X General cify) ▼ Zip Code 77225 2008 X General	CC	ype 011 egory/	Transaction ID: 1617 Date of Disbursement	Y Y O O 8 Y Sement this Period

J 7			22 X 23 24 25 28 28a 28b 28c 29 1 for the purpose of soliciting contributions
or for commercial purposes, other than using the national property of the commercial purposes, other than using the national property of the commercial purposes, other than using the national property of the commercial purpose of Purpose of Disbursement Purpose of Disbu	State Zip Code	011 Category/	Transaction ID: 16176353 Date of Disbursement M 2 M / D D D Y Y Y Y O Y 8 Amount of Each Disbursement this Perior
Full Name (Last, First, Middle Initial) Gene Green Congressional Campaign Mailing Address PO Box 16128 City Houston Purpose of Disbursement Void of 10/08 check Candidate Name Rep. Gene Green Office Sought: X House Disbu	TX 77222	Category/	Date of Disbursement Max M
Gene Green Congressional Campaign Mailing Address PO Box 16128 City Houston Purpose of Disbursement Void of 10/08 check Candidate Name Rep. Gene Green Office Sought: X House Disbu	TX 77222	Category/	Date of Disbursement Max M
City Houston Purpose of Disbursement Void of 10/08 check Candidate Name Rep. Gene Green Office Sought: X House Disbu	TX 77222	Category/	Amount of Each Disbursement this Perio
Houston Purpose of Disbursement Void of 10/08 check Candidate Name Rep. Gene Green Office Sought: X House Disbu	TX 77222	Category/	
Void of 10/08 check Candidate Name Rep. Gene Green Office Sought: X House Disbu	rsement For 2008	Category/	-1000.00
Rep. Gene Green Office Sought: X House Disbu	rsement For: 2008		
	rsement For: 2008	, , , , , , , , , , , , , , , , , , ,	
Senate President State: TX District: 29	Primary X General Other (specify) ▼		Void of 10/08 check
Full Name (Last, First, Middle Initial)			Transaction ID: 16198485
Bright For Congress.Com			Date of Disbursement
Mailing Address P.O.Box 2106			12 M / D D D / Y Y Y O Y 8 Y
City Montgomery	State Zip Code AL 36102		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution Candidate Name		011	1000.00
Mr. Bobby Bright		Category/ Type	
Senate President	rsement For: 2008 Primary General X Other (specify) General Debt Re		Contribution
Full Name (Last, First, Middle Initial) Griffith For Congress			Transaction ID: 16198490 Date of Disbursement
Mailing Address PO Box 2916			12 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Huntsville	State Zip Code AL 35804		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Mr. R Parker Griffith		Category/ Type	
Senate President	rsement For: 2008 Primary General X Other (specify) General Debt Re		Contribution
SUBTOTAL of Disbursements This Page (optional			1000.00
TOTAL This Period (last page this line number or			1500.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check onli	NUMBER: PAGE 229 / 231
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c x 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam	•		, ,
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: 16165423
Coleman for Senate Recount Fund			Date of Disbursement
Mailing Address 1412 Energy Park Drive	#11		$\begin{bmatrix} M & M $
City Saint Paul	State Zip Code MN 55108		Amount of Each Disbursement this Period
Purpose of Disbursement Donation		011	5000.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		Donation
State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	5000.00

A.

В.

C.

CHEDULE B (FEC Form 3X)	Use sepa	Use separate schedule(s) FOR LINE (check on						PAC	PAGE 230 / 231			
EMIZED DISBURSEMENTS	for each o	category of the Summary Page	X	21b 27	Ĺ:	22 28a	23 28b	\mathbf{L}	24 28c	25 29		26 30b
y Information copied from such Reports and Statem for commercial purposes, other than using the name												
NAME OF COMMITTEE (In Full)	e and addres	ss of arry political	COMMIN	iee io s	Olicit	CONTINUE	1110115 11	OIII S	uch cc	minilee		
American Hospital Association PAC												
Full Name (Last, First, Middle Initial)					Т	ransac	tion ID	: 16	52667	'88		
American Express					1	Date of I			nt			
Mailing Address Ste. 001						12	/ D	2	/ L	ž 0 ŏ	8 ^Y	
,	State	Zip Code			-	Amount	of Each	n Disk	oursen	nent this	Perio	d
Chicago	IL	60679			- 1					4.5	50	\neg
Purpose of Disbursement Merchant Fees			00	1	'			-				_
Candidate Name			Cateo Typ	jory/								
Office Sought: Senate President State: Disburse	ement For: Primary Other (spe	General cify) ▼			M	lerchai	nt Fees	S				
Full Name (Last, First, Middle Initial)					Т	ransac	tion ID	: 16	52667	'91		
American Express					[Date of I			nt			
Mailing Address Ste. 001						^M 2 ^M	/ D) 5 ^D	/ Y	ž 0 ŏ	8 ^Y	
,	State	Zip Code			-	Amount	of Each	n Disk	oursen	nent this	Perio)d
Chicago	IL	60679			- 1			•		36.8	19	\neg
Purpose of Disbursement Merchant Fees			00	1	1			•	-	00.0	,,,	_
Candidate Name			Cate	jory/								
Senate President	ement For: Primary Other (spe	General cify) ▼			N	lerchai	nt Fees	S				
State: District:												
Full Name (Last, First, Middle Initial) Merchant Bankcard						ransac Date of I	Disburs	emer			V	
Mailing Address 1601 Elm Street						^M 2 ^M		3		200	8	
City Dallas	State TX	Zip Code 75201			1	Amount	of Each	n Disk	oursen	nent this	Perio	d
Purpose of Disbursement		. 5_5.	_				-			153.7	7	
Merchant Fees			00	1	"	-						
Candidate Name			Cateo Typ									
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼			M	lerchai	nt Fees	S				
BTOTAL of Disbursements This Page (optional)				<u> </u>					*	195.1	6	
OTAL This Period (lest need this line number and)								•				\neg
OTAL This Period (last page this line number only) AN026				•		_	_			1 3X) (Re		_

A.

В.

SCHEDULE B (FEC Form 3X)

President

District:

FOR LINE NUMBER: PAGE 231 / 231 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Transaction ID: 16266795 Merchant Bankcard Date of Disbursement 0 4 2008 Mailing Address 1601 Elm Street City State Zip Code Amount of Each Disbursement this Period Dallas TX 75201 101.81 Purpose of Disbursement Merchant Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Merchant Fees General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 16266796 Citibank, F.S.B. Date of Disbursement 18 2008 Mailing Address 1400 G Street, NW City State Zip Code Amount of Each Disbursement this Period 20005 Washington DC 108.31 Purpose of Disbursement Bank Fee 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Bank Fee Senate Primary General

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	210.12
TOTAL This Period (last page this line number only)	•	405.28

Other (specify)

State: